

Saturday School

Program Description: To address student absences, Saturday school classes will operate to allow students the opportunity to voluntarily participate as a means of making up missed instructional time. Students classified as chronically absent or truant will be assigned Saturday school automatically, parental permission is required for all students including non-truant students. Throughout April and on two dates in May, students will have multiple opportunities to collaborate with teachers to complete classwork, homework, and test corrections via Edmentum. Each session will feature teachers from various core areas and staff may be available to provide support in additional areas. This program is based on statutory laws and regulations.

Parents are responsible for transportation. Students must bring devices, books, and academic assignments to be completed. School rules and dress code/personal appearance expectations apply. Students will be reassigned if school is not in session on the day before Saturday School. Cell phones will be collected and secured at the beginning of the session. Students who misbehave will be removed, with parent contact, and marked as incomplete.

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Saturday School Days and Time 8:30 am to 12:00 pm.

April 5

April 12

April 26

May 3

May 10

Saturday School Permission Slip

Student Information:

Name: _____

Grade: _____

School: Freedom High School

Parent/Guardian Information:

Name: _____

Phone Number: _____

Email: _____

Saturday School Details:

Dates: April 5, April 12, April 26, May 3, May 10

Time: 8:30 a.m. to 12:00 p.m.

Location: Enter through Door #1 and proceed to the designated area (list posted in the main lobby)

Reason for Attendance:

- Academic Support
- Enrichment Activities
- Test Corrections
- Other: _____

Emergency Contact Information:

Name: _____

Phone Number: _____

Medical Information:

Allergies: _____

Medications: _____

Other: _____

Parent/Guardian Consent:

I, the undersigned, give permission for my child, _____, to attend Saturday school on the dates specified above. I understand that my child will be supervised by school staff and that all necessary precautions will be taken to ensure their safety.

Signature: _____ Date: _____