



**BOARD OF COOPERATIVE EDUCATIONAL SERVICES**  
**Eastern Suffolk BOCES**  
 First Supervisory District of Suffolk County  
**HIGH SCHOOL REGISTRATION FORM**

2017-18  
 Summer School Course  
 Registration  
 (631) 244-4283

**REGISTRATION FORMS WITHOUT SIGNATURES WILL NOT BE ACCEPTED**

**DIRECTIONS:** Your home school principal or guidance counselor must approve your registration by signing this registration form.  
**THE ATTACHED MEDICAL FORM MUST BE COMPLETED AND SUBMITTED WITH REGISTRATION.**

STUDENT NAME \_\_\_\_\_ Student ID # \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_  
 NUMBER \_\_\_\_\_ STREET \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
 MAILING ADDRESS (if different) \_\_\_\_\_ GENDER FEMALE  MALE   
 HOME PHONE \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_  
 DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_\_ GRADE LEVEL DURING SCHOOL YEAR 2016-2017 \_\_\_\_  
 PARENT/ PERSON IN PARENTAL RELATION (PRINT) \_\_\_\_\_ LAST \_\_\_\_\_ FIRST \_\_\_\_\_  
 EMERGENCY CONTACT \_\_\_\_\_ EMERGENCY # \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

**THIS SECTION MUST BE COMPLETED IN ITS ENTIRETY BY THE GUIDANCE COUNSELOR.**  
**IF THERE IS ANY MISSING INFORMATION, THE APPLICATION WILL NOT BE ACCEPTED.**

District \_\_\_\_\_ Student ID# \_\_\_\_\_  
 High School \_\_\_\_\_ Tuition District (if different) \_\_\_\_\_  
 BEDS Code \_\_\_\_\_

All required health immunizations are up to date and on file in the home school Yes  No   
 \*\*Student has an IEP Yes  No  \*\*Please attach a copy to this form  
 \*\*Student has a 504 Yes  No  \*\*Please attach a copy to this form  
 ESL Student Yes  No  Exam in Alternate Language Yes  No  Please specify language \_\_\_\_\_

**Courses (R) in Bold are Regents courses and include Regents Examinations. Regents Review classes also include Regents Examinations. Place an "x" next to your choice(s). Courses indicating (CC) are Common Core courses.**

HS Courses (max. two)		Review Classes	Regents Examinations
English 9	Global History 9	English Language Arts	English Language Arts
English 10	<b>Global History &amp; Geography 10 (R)</b>	Geometry	Geometry
<b>English Lang Arts (R)</b>	<b>US History/Government (R)</b>	Algebra I	Algebra I
English 12	Government/Economics	Algebra II	Algebra II
Math 1A (P-M Only)	Spanish 1A (P-M Only)	Global History and Geography	Global History and Geography
<b>Geometry (R)</b>	Spanish 1B (P-M Only)	US History and Government	US History and Government
<b>Algebra I (R)</b>	Spanish I	Physical Setting/Earth Science <sup>A</sup>	Physical Setting/Earth Science <sup>A</sup>
<b>Algebra II (R)</b>	Spanish II	Physical Setting/Chemistry	Physical Setting/Chemistry
<b>Chemistry (R)</b>	ESL	Living Environment	Living Environment
<b>Earth Science <sup>A</sup>(R)</b>	Health		
Living Environment (R)	Physical Education		

<sup>A</sup>All students taking the Earth Science Regents are **required** to retake the Lab Performance examination as well. You will be notified in writing of your scheduled date. For any New York State Exam NOT related to your assigned course(s) you **MUST** register for that exam separately.

**Payment must be made by money order or certified check payable to the DISTRICT where the student registers.**

RCT Examinations	
RCT Reading	
RCT Writing	
RCT Math	
RCT Science	
RCT Global Studies	
RCT US History and Government	

When signing up for an RCT examination, an IEP must be attached to this form.

**RESIDENTS** (including Bay Shore, East Islip, Hampton Bays & Patchogue-Medford) – There is no tuition for the summer school program.

**NON-DISTRICT RESIDENTS or STUDENTS FROM NON-PARTICIPATING DISTRICTS** pay the amount listed for each district, per course.

Location	Course*** Cost Per Course	Regents Review Course*** Cost Per Course	Regents Exam Only Cost Per Exam
Bay Shore UFSD*	\$216.15	\$101.60	\$61.76
East Islip UFSD	\$221.04	\$103.90	\$63.15
Hampton Bays UFSD	\$314.84	\$147.99	\$89.95
Patchogue-Medford UFSD*	\$236.32	\$111.08	\$67.52

**CLASSES WILL BE OFFERED CONTINGENT ON SUFFICIENT ENROLLMENT.** If a class does not run due to low enrollment, you may be offered a seat in another program. Please see Summer School Administration for more information.

\*\*\*Includes the cost of one Regents Exam. If a second Regents Exam is required, please see site administration for details.

Registration for Regents Review and Regents Exams Only must be completed prior to July 13, 2017. Students will NOT be able to take a Regents exam unless they are registered by the deadline above. Students will NOT be admitted on the day of the exam without PRIOR registration.

**Cash, credit cards\* and personal checks will not be accepted.** (\*Bay Shore & Pat-Med accepts credit cards.)

**PRINCIPAL'S APPROVAL (Required)**

I approve the above summer school registration. The student indicated above has completed all appropriate pre-requisite courses. All state required immunizations have been received.

\_\_\_\_\_  
Print Principal's or Guidance Counselor's Name

\_\_\_\_\_  
Principal's or Guidance Counselor's Signature

\_\_\_\_\_  
Home School Phone #

\_\_\_\_\_  
Date

**PARENTAL CONSENT**

The summer semester is comprised of 25 instructional days and 2 examination days. Eastern Suffolk BOCES requires that attendance be in accordance with the policy set at each individual site. Credit may not be granted if absences exceed three days.

If your child does not attend the course/assignment, no refund will be given.

Students taking state tests are required to submit appropriate identification.

Approved ID includes:

- passport
- government-issued ID
- student ID (from student's high school as of June)
- driver license
- non-driver ID card

We pledge to do our best to place your child in the site you selected. However, in rare instances, we may have to reassign your child to a different site due to lack of enrollment.

You agree that your child will follow the summer school site's Code of Conduct regarding discipline and attendance.

\_\_\_\_\_  
Parent/Person in Parental Relation Signature

**MEDICAL FORM MUST ACCOMPANY REGISTRATION FORM**

**FOR OFFICE USE ONLY:**

TOTAL AMOUNT PAID \$ _____	RECEIPT # _____	CHECK/MONEY ORDER# _____
REGISTRAR _____	DATE _____	

**Please attach a copy of latest report card.**

**Non-Discrimination Statement**

Eastern Suffolk BOCES does not discriminate against any employee, student, applicant for employment, or candidate for enrollment on the basis of sex, gender, race, color, religion or creed, age, weight, national origin, marital status, disability, sexual orientation, military or veteran status, domestic violence victim status, genetic predisposition or carrier status, or any other classification protected by Federal, State, or local law. This policy of nondiscrimination includes: access by students to educational programs, student activities, recruitment, appointment and promotion of employees, salaries, pay, and other benefits. ESBOCES also provides equal access to the Boy Scouts and other designated youth groups. ESBOCES fully complies with all applicable rules and regulations pertaining to civil rights for students and employees (e.g., Title IX of the Education Amendments of 1972, §504 of the Rehabilitation Act of 1973, Titles VI and VII of the Civil Rights Act of 1964, Dignity for All Students Act, §303 of Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, and the Boy Scouts of America Equal Access Act of 2001). Inquiries regarding the implementation of the above laws should be directed to either of the ESBOCES Civil Rights Compliance Officers at [ComplianceOfficers@esboces.org](mailto:ComplianceOfficers@esboces.org); the Assistant Superintendent for Human Resources, 631-687-3029, or the Associate Superintendent for Educational Services, 631-687-3056, 201 Sunrise Highway, Patchogue, NY 11772. Inquiries may also be addressed to the Office for Civil Rights at the US Department of Education, 32 Old Slip, 26<sup>th</sup> Floor, New York, NY 10005, 646-428-3800, [OCR.NewYork@ed.gov](mailto:OCR.NewYork@ed.gov).