

**NIGHT ACADEMY REGISTRATION FORM**

**Night Academy is for credit retrieval only. Student must have previously taken the course and failed.**

**Student:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Course(s) Requested:** \_\_\_\_\_

Send or drop off registration to: Night Academy, c/o Tiger Mt. H.S., 565 NW Holly St., Issaquah, WA 98027

**COUNSELOR APPROVAL IS REQUIRED TO ENROLL**

**This student has previously taken the above course(s) and did not receive a passing grade.**

S/he is authorized to enroll in Night Academy at \_\_\_\_\_ Tiger Mountain \_\_\_\_\_ Liberty

***COUNSELOR SIGNATURE REQUIRED:*** \_\_\_\_\_

Special education is not available as part of the Night Academy program, however, students with disabilities who, with **reasonable** accommodations, are able to participate and derive educational benefit in a regular classroom setting using regular curricula are eligible to apply.

Counselor, please indicate whether this student is enrolled in special education or has a 504 Plan. If the student does have a 504 or IEP a copy must be attached to this registration form or fax it to Amy Wiggins at 6225.

**Date** \_\_\_\_\_ Please check: IEP \_\_\_\_\_ 504 \_\_\_\_\_ Attached Yes No (please circle)

**STUDENT/PARENT AGREEMENT:** We understand that regular and punctual attendance is a requirement of the Night Academy program. **In order to receive course credit, the student may miss no more than one session per course, and there are no excused absences for any reason.** We also understand that textbooks and materials are loaned to the student and are to be returned at the end of the course, in good condition, or reasonable charges will be assessed prior to granting course credit. **We understand that S/U grades will be given for English, Social Studies, Science, and Math courses.** We also understand that district policy regarding Rules of Conduct for students applies during Night Academy. If a student's conduct results in removal from a class, tuition will not be refunded.

Student Signature \_\_\_\_\_ Parent Signature \_\_\_\_\_

**TUITION**

Payment of \$200 for one course is required at the time of registration. For additional information please phone Amy Wiggins at 425-837-6210 or Ed Marcoe at 425-837-6211. Please make checks payable to the Issaquah School District. If payment arrangements need to be made please contact Amy Wiggins at Tiger Mountain CHS.

\*\*\*For Office Use Only\*\*\*

Receipt Number \_\_\_\_\_ Tuition taken by \_\_\_\_\_ (school official)  
 Tuition Paid \$ \_\_\_\_\_ Date of Receipt \_\_\_\_\_

**GRADE:**

Final Grade \_\_\_\_\_ for course \_\_\_\_\_ Teacher \_\_\_\_\_