



AMOS P. GODBY HIGH SCHOOLS

Summer Bridge Program

TO BE COMPLETED BY STUDENT:

Student Name _____ Student ID: _____

D.O.B _____ Middle School Attended: _____

Parent/Guardian Name: _____

PROGRAM POLICY EXPECTATIONS:

- Students are expected to be on time and remain until the program is dismissed.
- It is an opportunity and privilege to attend Summer Bridge. Any violations of the Code of Student Conduct may cause removal from the program.
- More than 1 absence may withdraw you from Summer Bridge.
- **TRANSPORTATION IS NOT PROVIDED!!!** All students must be dropped off and picked up each day!

I have read and agree to all of the requirements and expectations.

Student Signature

Date

TO BE COMPLETED BY PARENT/GUARDIAN

Parent/Guardian signature

Date

Parent/Guardian email

Phone #

