$Location \ Site: \ HCHS \qquad OR \quad WMS \quad \ \ (\text{depending on home school})$ 



## M<sup>3</sup>: Mathematical Minds in the Making Summer Enrichment Camp



#### **Student Application Form**

Name:		Phone: _		
Address:				
		ne:Email:		
School Name:		Current M	Math Course:	
Grade Level:		Mathematics Teacher:		
Courses Completed (Most	recent courses)			
Subject Area	Course Name	Course Grade	CRCT Score (most current) Grade 8 Grade 7 Grade 6	
Mathematics:				
English/ Language Arts:				
Science:				
Social Studies:				
Connections:				
Emergency Contact Infor	mation:			
Parent/Guardian Name:		Home Phone:		
Email:		Mobile Phone:		
What do you hope to gain fi	rom Mathematics Summ	er Camp?		
all policies and expectation	s set forth by the Henry addressed according to	County Schools S the same said har	er camp. I also agree to abide by Student Handbook. I understand Indbook. I understand that my	
	·e	Student Si	ionature	



## M<sup>3</sup>: Mathematical Minds in the Making Summer Enrichment Camp



# Contract of Success

- ❖ I understand that I must attend all class sessions during the Mathematics Summer Camp.
- ❖ I understand that I must complete all class assignments.
- ❖ I understand that I must attend all summer sessions (20 days of instruction) in order to be considered for placement into high school as determined by the appeals committee led by my middle school principal.
- ❖ I understand that participation in this summer camp does not guarantee my placement into ninth grade mathematics.
- ❖ I understand that I must participate in and contribute to all exciting and engaging lessons this summer.
- ❖ I understand that I must seek assistance and ask questions, when needed.
- ❖ I understand that this course will not count as a mathematics credit.
- ❖ I understand that I will still need four units of mathematics credit in order to graduate from high school.
- ❖ I understand that I may still be enrolled in a mathematics support class to assist me during the ninth grade year.
- ❖ I understand that I must do my very best and show proficiency on the standards addressed in this course in order to be successful in CCGPS Coordinate Algebra/Math I.



Certification:	
Student Signature	Parent Signature
Da	nte



#### M<sup>3</sup>: Mathematical Minds in the Making Summer Enrichment Camp Teacher Recommendation Form



Student Name:		Home School Name:		
Grade Level:	Average in your class:	Score on Grade 8 CR	RCT:	
closed, sealed envelo	nd this form to your mathematics ope with his/her signature on the ar completed application packet	back across the seal. This clo	sed envelope should	
Please answer the fo	llowing questions regarding the	specified student:		
(1) Do you recomm	nend this student to enroll in th	ne Mathematics Summer Ca	mp?	
Yes	No Why or why no	ot?:		
` ' '	, will this student put forth the inate Algebra/Mathematics I?	e required effort to be succes	ssful in	
Yes	Only with additional teacher pr If no, re	oddingNo eason:		
	, does this student have the manate Algebra/Mathematics I?	athematical ability to be suc	cessful in	
Yes, independe	ntly Yes, with extra a	assistance from the teacher eason:		
	, does this student have the ap nate Algebra/Mathematics I?	propriate reading ability to	be successful in	
Yes, independe	ntly Yes, with extra a	assistance from the teacher eason:		
(5) What is the stud	dent's test average in your clas	ss?		
(6) What is the stud	dent's overall average in your	class?		
(7) What strategies	s have you employed over the s	school year to assist this stud	lent?	
Additional Comme				