

**Maynard H. Jackson High School**  
**Mission Possible!!! Motivate, Educate, Graduate!!!**

**Operation P.U.S.H.**

**(Prepare Until Success Happens)**

Maynard Jackson High is dedicated to ensure all students meet their mandatory graduation requirements and enhance their overall academic performance on their final transcripts. 9<sup>th</sup>-12<sup>th</sup> grade EOCT re-testers will participate in designated EOCT courses that will provide intensive remediation to ensure student success on the TEST.

**June 9-26, 2014**

**Monday through Thursday from 8:30am to 12:30pm**

**Location: Maynard H. Jackson High School  
801 Glenwood Avenue  
Atlanta, GA 30316**

**EOCT Summer 2014 Retest Dates:**

<b>Monday, June 23<sup>rd</sup></b>	<b>U.S. History and Economics</b>
<b>Tuesday, June 24<sup>th</sup></b>	<b>Biology and Physical Science</b>
<b>Wednesday, June 25<sup>th</sup></b>	<b>American Literature and 9<sup>th</sup> Grade Literature</b>
<b>Thursday, June 26<sup>th</sup></b>	<b>CCGPS Coordinate Algebra</b>
<b>Friday, June 27<sup>th</sup></b>	<b>CCGPS Analytic Geometry</b>

**Student Registration Packet**

# Registration Information

## Operation P.U.S.H.

### (Prepare Until Success Happens)

Maynard H. Jackson High School will be hosting a summer test preparation program for all students who failed their End of the Course Tests (EOCTs). Operation P.U.S.H. is a school wide initiative to ensure all students have the opportunity to increase their overall academic grade and address academic areas of concerns according to their Spring 2014 EOCT test results. Students that fail their class may have an opportunity to pass the class if they receive a higher score on the EOCT retest. All program participants will participate in differentiated activities that are student centered and test preparation programs that will permit them an opportunity to increase their success rate on the upcoming retest. Regardless of whether or not students passed their EOCT class, all students are still held accountable to **meet** or **exceed** the state standards on their content related EOCT tests according to the College and Career Ready Performance Index (CCRPI). **Maynard Jackson High School will provide bus transportation for students within our zone. Free breakfast and lunch will also be provided.**

At Maynard H. Jackson High School, the motto is **MISSION POSSIBLE: MOTIVATE, EDUCATE, GRAUDATE.** Our duty is to facilitate success for all students. Therefore, we encourage you to participate in our summer bridge program that will propel students towards academic excellence.

Your Principal,

Mrs. Stephanie Johnson

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## Operation P.U.S.H. Course Selection

Maynard Jackson High School (Check all that apply)

English Language Arts	Mathematics	Science	Social Studies
<input type="radio"/> 9 <sup>th</sup> Grade Literature	<input type="radio"/> Coordinate Algebra	<input type="radio"/> Biology	<input type="radio"/> U.S. History
<input type="radio"/> 11 <sup>th</sup> Grade Literature	<input type="radio"/> Analytic Geometry	<input type="radio"/> Physical Science	<input type="radio"/> Economics
	<input type="radio"/> Math II		

# Registration Form

- Complete **all** portions of the registration form and return to the front office by **Friday, May 21, 2014**. **All STUDENTS WHO FAIL THEIR CONTENT SPECIFIC EOCT, EVEN IF THEY PASS THEIR CLASSES MUST APPLY.**
- All school policies will be followed. Students who violate these rules will result in parental notification and removal from the campus of Maynard H. Jackson High School.
- Bus transportation will also be provided to all students.
- For car riders, the drop off time is 8:00am and parents must pick up all students by 12:30pm
- Students will be provided breakfast and lunch during the program.

Student Name \_\_\_\_\_

Parent(s)/Guardian(s) Name \_\_\_\_\_

Parent/ Guardian Cell Phone Number \_\_\_\_\_

Parent Home Phone Number \_\_\_\_\_

Email address \_\_\_\_\_

I understand and accept that the **Operation P.U.S.H.** is a school sponsored event. As a participant, I assume full responsibility for my actions and agree to conduct myself in a manner that recognizes the individual rights of others and their property. Since this event is being held on school property, I understand that I must adhere to all rules and regulations concerning conduct at school and on school property. In the event of an accident or claim, my parent(s)/guardian(s) and I agree to indemnify and hold forever harmless Atlanta Public Schools, Maynard H. Jackson High School as well as any employees, faculty, staff, and volunteers from any and all liability of any kind whatsoever for loss or injury arising from activities on or off the premises of Maynard H. Jackson High School or resulting from traveling to or from the activities of Maynard H. Jackson High School, including loss or injury subsequent of negligence or gross negligence.

\_\_\_\_\_  
Student Signature *Maynard H. Jackson, Jr. High School* Date

\_\_\_\_\_  
Parent /Guardian Signature (Regardless of student age) Date

**Authorization to Obtain Urgent or Emergency Medical Care**

As the parent(s) or custodial adult(s) of \_\_\_\_\_ (child/youth's name), I/we give permission for Maynard H. Jackson High School, its faculty, staff, and volunteers to obtain urgent or emergency medical care for my/our child, and I/we authorize health care providers to render such care as may be necessary. It is understood that reasonable efforts will be made to contact me/us prior to obtaining such care, but I/we authorize such care whether I/we are contacted or not, and I/we agree to be financially responsible for such care.

\_\_\_\_\_  
**Parent/Guardian Signature**

**Medical Insurance Company:** \_\_\_\_\_

**Policy/Group Number:** \_\_\_\_\_

**Participant I.D. Number:** \_\_\_\_\_

**Medical Insurance Phone Number:** \_\_\_\_\_

**Are there any specific health concerns we should know about your son/daughter (allergies, epilepsy, heart condition, fainting spells, etc.)**

\_\_\_\_\_

