

**SEAL STUDENT APPLICATION**  
**2009 BSAP Middle and High Summer School Programs**

(Please print)

\_\_\_ **Returning Student**

\_\_\_ **New Student**

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Gender

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Birth date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Current School

\_\_\_\_\_  
School Next Year

\_\_\_\_\_  
Parent / Guardian Full Name – Please print

\_\_\_\_\_  
Day Phone Number

\_\_\_\_\_  
Evening Phone Number

\_\_\_\_\_  
Cell Phone Number

\_\_\_\_\_  
Email Address

**To the Best of Your Ability Please Provide the Names of Courses Student Is Enrolled in This Year**

Current Math Course \_\_\_\_\_ Check Level: Special Ed \_\_\_ Regular Ed \_\_\_ Honors/GT \_\_\_ Not Sure \_\_\_

Current English Course \_\_\_\_\_ Check Level: Special Ed \_\_\_ Regular Ed \_\_\_ Honors/GT \_\_\_ Not Sure \_\_\_

**Please Read Carefully And Place a Check When Appropriate**

\_\_\_ **I give** permission for my son/daughter to participate in walking Field Trips. I will be notified of the specific date and destination for the field trip.

\_\_\_ **I authorize** the BSAP staff to secure a copy of my child's report card, test scores, and/or any other information that may be relevant to the success of my child. It is understood that this information will be handled confidentially.

\_\_\_ **I agree** to support my child's achievement during this program by attending all parent activities and by communicating regularly with the BSAP SEAL Staff.

\_\_\_ **I am** in need of scholarship assistance for partial payment of the tuition fees. (I must request and complete a Tuition Reduction Request Form and a Financial Information Sheet in order to be considered.)

\_\_\_ **My child will** ride the SEAL bus to and from school. (Please note: *bus stops are predetermined.*)

\_\_\_ **My child will not** ride the bus to and from the SEAL. I will provide transportation to and from the SEAL. I understand that I must have him/her at school by 9:00 am and must pick him/her up no later than 3:00 pm. I understand that the school cannot provide childcare beyond 3:00 pm

\_\_\_ I am aware that a **late fee of \$1.00 per minute is requested for children that are not picked up on time.** I will make payment to the SEAL Administrator upon arrival for my child. (Checks should be written to: BSAP SEAL)

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

\_\_\_\_\_  
**Date**

**For Office Use Only:**

**Name on Payment** \_\_\_\_\_ **Payment Type:** Cash Check # \_\_\_\_\_ MO# \_\_\_\_\_

**CC Type:** Visa Master Card **CC#** \_\_\_\_\_ **Amount of Payment:** \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

## **2009 BSAP SUMMER SEAL PROGRAM**

10598 Marble Faun Court, Columbia, MD 21044 ~ 410.313.7019, ext. 226 ~ <http://www.hcpss.org/schools/bsap>

### **APPLICATION PROCEDURES**

- ✦ Complete all parts of the application.
- ✦ Attach a copy of your child's latest report card and other pertinent documents to the application. (ie: Health /Emergency Information Form, and a copy or copies of the current IEP or 504 if your child receives special education services, course selection form, etc.)
- ✦ Parents/guardians may apply for tuition reduction. Students who have been approved at their home school for free or reduced meals or other conditions will be considered for tuition reduction. If applying for a tuition reduction, attach a completed copy of the **Tuition Reduction Request Form**, along with the other required documents. A copy of the form may be downloaded from the website, [www.hcpss.org/summer](http://www.hcpss.org/summer), copies are also available at the BSAP Office. Applications without the completed form will be processed as full tuition.
- ✦ Enclose your payment of at least 1/3 of tuition cost.
- ✦ Bring the **completed** application and **all necessary attachments** (Report Card, Course Selection Form, Tuition Reduction Form, etc.) to the Faulkner Ridge Center between the hours of 9:00AM – 4:00PM or to one of the scheduled registrations at the Faulkner Ridge Center, 10598 Marble Faun Court, Columbia, MD.
- ✦ Mailed and hand-delivered registration packets should be received no later than **May 15, 2009** at the following address:

**Black Student Achievement Program  
Attention: Robert Hartge  
HCPSS at Faulkner Ridge Center  
10598 Marble Faun Court  
Columbia, Maryland 21044**

***Only students with completed applications will be registered for the BSAP-SEAL Program.***

# 2009 BSAP SUMMER SEAL PROGRAM

## PLEASE NOTE...

- \$450 tuition fee covers the cost of instructional materials.
- Lunch will be provided for all students.
- A limited number of spaces are available.
- You have the option of making payments in 3 easy installments. The last payment will be due by **May 15, 2009**.
- If we do not receive each of the following items prior to **May 15, 2009**, your space in the program may be forfeited in order to make room for the students who are on the waiting list.
  - Tuition (\$450 or adjusted amount based upon approval of tuition reduction request)
  - Application
  - Most Recent Report Card
  - Course Selection Form
  - Health/Emergency Form
  - Tuition Assistance Form (if a tuition reduction is requested)
- Students participating in the BSAP summer programs are expected to participate in the entire 4-week experience.
- Check, cash, money order or credit card payments must be submitted for the proper amount. Make checks payable to the BSAP Program. Postdated checks will not be accepted. All checks will be deposited upon receipt.
- Checks returned by your bank due to insufficient funds will be assessed a \$25 charge. If payment is not received in full, the unpaid amount will become a debt and will be entered as an outstanding obligation at your child's school. All obligations must be satisfied prior to graduation.
- In the case of a forfeit registration or any cancellation, the following refund schedule applies and refunds will be issued by September 1, 2009.
  - Anyone who cancels before May 15, 2009 and has paid in full will receive a full refund.
  - Anyone who cancels between May 15 and June 15, 2009 and has paid in full will receive a \$400 refund.
  - Cancellations after June 29, 2009 cannot be refunded.
  - All cancellation requests must be received in writing to the BSAP Office at 10598 Marble Faun Court, Columbia, MD 21044 to the attention of Robert Hartge.
- BSAP reserves the right to expel without refund any student who violates BSAP Summer Program Rules and Expectations, HCPSS policies or violates Maryland State law.



Spring, 2009

Dear Parents/Guardians,

The Howard County Public School System is proud to announce that the Black Student Achievement Program will offer another outstanding summer experience for Middle and High School students:

**Student Enrichment and Accelerating Achievement for Leadership (SEAL)**

The dates for the SEAL program are **June 29, 2009 through July 24, 2009** at Bonnie Branch Middle School. This unique program is carefully developed to address the needs of students entering grades six through twelve. The main objective of SEAL is to provide instruction that will strengthen academic skills of each student in Reading, English, Math and American Government.

Daily transportation to and from the SEAL program will be arranged for students at pre-determined sites. Our staff will consist of certified teachers, academic mentors, and other professionals. Lunch will be provided daily. The cost of the program is \$450 per student. The address for Bonnie Branch Middle School is 4979 Ilchester Road, Ellicott City, MD 20743.

**BSAP Summer School Registration**

Applications are handled on a first-come first serve basis for eligible students entering grades 6 – 12. If you would like your child to participate in the BSAP SEAL program, please complete the attached application packet and return it to the Faulkner Ridge Center at Black Student Achievement Program, HCPSS at Faulkner Ridge Center, 10598 Marble Faun Court, Columbia, MD 21044. The deadline for applications is May 15, 2009.

- An on-site registration for BSAP Summer Programs will take place on Wednesday, April 15 at Faulkner Ridge Center from 4:00PM to 7:00PM.
- A final registration will be held at Oakland Mills High School, 9410 Kilimanjaro Road, Columbia, MD 21045 on Saturday, April 25<sup>th</sup> from 9:00AM – 12:00PM.

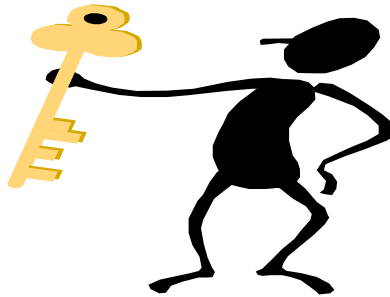
**Please do not call Bonnie Branch Middle School regarding BSAP summer school inquiries.** If you have any questions, please contact Robert Hartge at 410.313.7019 ext. 226 or [robert\\_hartge@hcpss.org](mailto:robert_hartge@hcpss.org).

Sincerely,

Eugene Rose  
BSAP SEAL Administrator

CC: Vera Wilkins, Specialist  
Black Student Achievement Program

**2009 Secondary Black Student Achievement  
Summer Student Enrichment And Accelerating Achievement Of  
Leadership (SEAL) Program**



**Who:** Students entering grades 6 – 12 ([2009 – 10 school year](#))

**What: Academic Enrichment:**  
Math, Reading, American Government,  
SAT Prep, Drama, Technology, Basketball, Music, Health/Fitness, Guest  
Speakers and more!

**Where: Bonnie Branch Middle School**  
**4979 Illchester Road**  
**Ellicott City, MD 20743**

**When: June 29<sup>th</sup> – July 24<sup>th</sup>**  
**9 a.m. – 3 p.m.**

**How: Applications available on-line at: [www.hcpss.org/summer](http://www.hcpss.org/summer), in  
schools, or in the Summer School Office**

Applications are due by **May 15, 2009**

Tuition is \$450

Please refer to application packet for details or call 410.313.7019 Ext. 226

**Walk In Registration Dates**

- An on-site registration for BSAP Summer Programs will take place on Wednesday, April 15 at Faulkner Ridge Center from 4:00PM to 7:00PM.
- A final registration will be held at Oakland Mills High School, 9410 Kilimanjaro Road, Columbia, MD 21045 on Saturday, April 25<sup>th</sup> from 9:00AM – 12:00PM.

# DISCIPLINE POLICY

The mission of the BSAP Summer Learning Camp is to provide an extended learning experience in a safe and nurturing environment. Students are expected to adhere to Howard County Public School System Student Code of Conduct. Any student who refuses or is unable to interact cooperatively and respectfully with adults and other children **will be dismissed** from the camp. *Tuition fees will not be refunded.*

You will be notified if your child's behavior puts him/her at risk of being dismissed from camp.

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**I have read and understand the BSAP Summer Learning Camp Discipline Policy.**

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Parent / Guardian Signature

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Date

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## Howard County Public School System

### Release Form

As a parent/guardian of \_\_\_\_\_, I grant permission for my child to be (*circle one*) photographed and/or videotaped. Photographs and/or video clips may be used:

- in a publication (i.e.: local and/or national newspaper article)
- on the school's website (your child's name will **not** be included on site)
- for use on local/national television I understand that the photograph(s) or videotape of my child will only be used for the purpose stated above.

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Signature of Parent/Guardian

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Date

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Signature of Witness

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Date