

SCHOHARIE CENTRAL SCHOOL DISTRICT

SUMMER ENRICHMENT PROGRAM 2022

6 Weeks of Epic Enrichment and Fun
in the Sun!!

**REGISTRATION IS
OFFICIALLY OPEN!
SIGN UP NOW!**

*Breakfast and Lunch
Provided Daily*

Dates: July 5th- August 11th (M-Th)

Time: 8:00AM-12:10PM

Location: Schoharie Elementary School
for any Students going into 1st-7th
grade.

SUMMER PRINCIPAL- MARCI TEBBANO

(518) 912-7589

mtebbano@schoharieschools.org



Schoharie Central School District

PO Box 430, 136 Academy Drive, Schoharie, New York 12157

MATTHEW L. WRIGHT
Director of Curriculum and PPS
Phone: (518) 295-6657
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ANDREA L. POLIKOSKI
Elementary School Principal
Phone: (518) 295-6651
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MARCELLA R. TEBBANO
Elementary School Assistant
Principal
Phone: (518) 295-6651
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IN THE PURSUIT OF EXCELLENCE

DAVID. M BLANCHARD – SUPERINTENDENT OF SCHOOLS
Phone: (518) 295-6679 / Fax: (518) 295-8178

DAVID J. BAROODY
School Business Administrator
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KEVIN T. CALACONE, Ed.D.
Jr./Sr. High School Principal
Phone: (518) 295-6601
Fax: (518) 295-8161

KRISTIN D. DUGUAY
Jr./Sr. H.S. Assistant Principal
Phone: (518) 295-6622
Fax: (518) 295-8161

Dear Schoharie CSD families,

Please find the enclosed student application for the 2022 Schoharie Summer Enrichment Program. This year, our Summer Enrichment Program will be offered to students currently in grades K-8. The goal of the program is to prevent the summer academic slide and increase student achievement in preparation for the next grade level.

2022 Summer Enrichment Program Details

Dates/Days	July 5th- August 11th/Monday-Thursday
Time	8:00 AM- 12:10 PM
Who	Students going into 1st-9th Grade
What	Students will engage in social, emotional and project-based learning experiences that will inspire curiosity, build knowledge and help students become confident learners. The entire summer program will have an emphasis on ELA and Mathematics.
Attendance	Students may only miss 4 days maximum of the program. If a student misses more than four days, they will be unenrolled and their spot will be given to a student on the waitlist.
Transportation	Transportation is provided for students beyond 1 mile.
Meals	Free Breakfast and Lunch-to-go provided
Program Contact Information	Marci Tebbano mtebbano@schoharieschools.org 518-912-7589

If interested, please fill out and return all enclosed forms to the Elementary or High School Office by May 2, 2022. Thank you for your continued support in your child's academic success!

Schoharie Summer Enrichment Registration 2022

Student Information

Student's Name: _____
DOB: ____/____/____ Age: _____ Current Grade: _____

Parent/Guardian #1: (First & Last Name): _____
Relationship to student: _____
Cell Phone #: _____ Work Number: _____
Email Address: _____
Physical Address: _____

Mailing Address (if different from above) _____

Child Resides in this household: (Circle One)

Full Time Part Time- List Days _____ Never

Parent/Guardian #2: (First & Last Name): _____
Relationship to student: _____
Cell Phone #: _____ Work Number: _____
Email Address: _____
Physical Address: _____

Mailing Address (if different from above) _____

Child Resides in this household: (Circle One)

Full Time Part Time- List Days _____ Never

Emergency Contacts:

If my child has to be taken home because of a minor illness and I am not there or cannot be reached, please call: (Please circle Yes or No if person below is allowed to pick up your child)

_____	_____	_____	_____	Yes	NO
(First and Last Name)	(Relationship)	(Cell Phone)	(Work Phone)		
_____	_____	_____	_____	Yes	NO
(First and Last Name)	(Relationship)	(Cell Phone)	(Work Phone)		
_____	_____	_____	_____	Yes	NO
(First and Last Name)	(Relationship)	(Cell Phone)	(Work Phone)		

Please Print Clearly

In an emergency, I authorize the school to call:

(Physician) (Phone Number) (Preferred Hospital)

(Dentist) (Phone Number)

Siblings at Schoharie Central School:

(Full Name) (Grade) (Teacher/Homeroom)

(Full Name) (Grade) (Teacher/Homeroom)

Dual household families, if requesting to receive mail correspondence, please provide the name and address of a parent or guardian who does not live at the same mailing address, but has the legal right to receive discipline, attendance, field trips, grading and testing information. All other information that goes home with students may not be mailed to both addresses.

(Name) (Mailing Address) (Town/City) (State/Zip Code)

Parent/Teacher Conference: We would prefer: JOINT_____ or Individual_____

Emergency Dismissal Plan: In the event that school is dismissed at an unscheduled time due to unforeseen circumstances, you will receive an automated notification from School Messenger. Please indicate instructions below:

Photo Release:

As a parent or guardian of this student, I hereby consent to the use of photographs/videotape taken during the course of the Summer Enrichment Program for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

____ **Yes**, I give consent for Schoharie Elementary to photograph my child for school purposes and/or at school events.

____ **No**, I do not authorize Schoharie Elementary to photograph my child for any event.

Guardian Signature: _____ Date: _____



**Schoharie Central School District
Transportation Department**

Phone: (518) 295-6684

Fax: (518) 295-6089

2022 Schoharie Summer Enrichment Program Transportation Form

Student Name: _____

Morning-Drop Off (8:00AM)

End of Program- Pick Up(12:10PM)

Monday	Bus or Parent/Guardian Drop Off	Monday	Bus or Parent/Guardian Pick Up
Tuesday	Bus or Parent/Guardian Drop Off	Tuesday	Bus or Parent/Guardian Pick Up
Wednesday	Bus or Parent/Guardian Drop Off	Wednesday	Bus or Parent/Guardian Pick Up
Thursday	Bus or Parent/Guardian Drop Off	Thursday	Bus or Parent/Guardian Pick Up

Signature of Parent/Guardian: _____

Please provide the address and name/number of person responsible for your student at requested address. The code word will be kept confidential. The purpose of this word is to confirm the identity of a caller attempting to change transportation information by phone.

Emergency Code Word: _____