

Rev Up Your Reading XIII



A four-week academic intervention
July 10 – August 4, 2017

Application for Admission

GENERAL INFORMATION:

Student Name: _____ **Age:** _____ **Date of Birth:** _____

Parent/Guardian Name: _____ **Email:** _____

Address: _____ **City/State/Zip** _____

Home Phone: _____ **Cell:** _____ **Work:** _____

Parent/Guardian Name: _____ **Email:** _____

Address (if different from above): _____ **City/State/Zip** _____

Home Phone: _____ **Cell:** _____ **Work:** _____

STUDENT INFORMATION:

School: _____ **Grade completed** (by 6/17): _____

What services does the student receive at school? _____

Reasons for interest in this program: _____

How did you hear about us? _____

Does student receive Orton-Gillingham tutoring? If so, by whom: _____

Any condition the program should be aware of? _____

Medication Policy: Students taking medication during the school year must continue medication during summer program.

Students will have average or better intelligence and have no behaviors that would prevent learning in small groups.

Reading/spelling assessment is required for enrollment. Appointment will be scheduled in May. Assessment time 30–50 minutes. The deposit will be refunded if the Blosser Center determines that the student would not benefit from the program.

TUITION: Please choose from the following summer school options:

- Tuition for tutoring and writing is \$1,500
- Tuition for small group math is \$800
- Tuition for both is \$2,300

Please make checks payable to: ***The Blosser Center***. Non-refundable deposit of \$500 is due with the application. Upon admission to the program, the fee is applied toward tuition. Balance is due by July 10. If you cancel, the deposit will be refunded only if we can fill the slot with another student. Please call the office to pay with a debit or credit card. Limited scholarship assistance and/or payment plans are available.

ENROLLMENT PROCESS:

Return this completed application form and deposit to the address below. Upon receipt, you will receive confirmation of your child's space. If your child is waitlisted, and a space does not open up, your deposit will be returned in full.

A screening assessment will be scheduled in May. The assessment will determine the appropriateness of the program for your child and will provide necessary information regarding skills the student has mastered. If the student will benefit from our program, the student will be enrolled. An enrollment packet will be sent to you and the balance of tuition will be due. (If testing shows that your child will not benefit from our program your deposit and any tuition paid will be returned. Withdrawal for any other reason results in the forfeit of deposit.)

***School starts July 10th at the Blosser Center inside
the Rose City Park Presbyterian Church (1907 NE 45th)***

Questions?

The Blosser Center: 503-234-4060 (info@theblossercenter.org)

Mail application and deposit to:

The Blosser Center for Dyslexia Resources
Mail: PO Box 18082
Portland, OR 97218

Parent Signature: _____ Date: _____

The Blosser Center welcomes all children who will benefit from our program, regardless of race, gender, religion, ability, family background, and family composition.
