



# Saturday School

Old Vail Middle School



**Every class of Saturday school is equivalent to three hours of remediation.** The time earned will fulfill hours needed to make up failing grades and excessive absences from the previous quarter. “Banking” of hours, storing them for future use is not permitted.

**There is no transportation provided for Saturday school.** Students must be dropped off and picked up. Parents/guardians must sign their child into and out of class at the OVMS library.

**Classes start at 8:30 a.m. sharp and conclude at 11:30 a.m.** The school’s front gate will be open by 8:15 a.m to make sure students are on campus in enough time for an 8:30 a.m. class start. Please do not drop students off earlier as there is no supervision prior to that time.

**There is zero tolerance for inappropriate behavior during Saturday School.** If your child is not completing work, staying on task, or following the ACT statement, he/she will not be allowed to return. This means that he/she will not receive credit for the time spent in that day’s class.

**Sign up is based on a first come, first served basis.** If classes are full and a second class cannot be offered, your child will be placed on a waiting list. Should space become available, you will be notified Friday so that you have adequate time to arrange for transportation. Due to the success of Saturday school in the past, classes tend to fill up quickly. If your child has signed up and cannot attend, please contact me by 11:00 a.m. the Thursday prior, in order to allow another student to fill that spot. If a student signs up and is a no show, future placement in classes will be hindered.

**Please complete the attached sheet and return it to Ms. Iris Bass no later than 8:00 a.m. on the Thursday prior to that week’s Saturday class.**

Thank you,

Iris Bass  
Student Achievement Teacher  
bassi@vailschooldistrict.org  
(520) 879-2409

August, 2016



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## Old Vail Middle School

### Sign Up Form



*Please print clearly*

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Advisory Teacher: \_\_\_\_\_ # of hours needed: \_\_\_\_\_

Subject(s) needed to make up: (please circle)

Math

Writing

Reading

Science

Social Studies

Other

If other, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

**By signing below I am acknowledging that I have read the attached letter and agree to the policies of Saturday school.**

X \_\_\_\_\_ Date \_\_\_\_\_  
Parent/Guardian signature

X \_\_\_\_\_ Date \_\_\_\_\_  
Student signature