

Holmes District School Board Title I  
Supplemental Educational Services

# ENROLLMENT FORM

Student must qualify for free or reduced lunch to receive free tutoring.

Student: \_\_\_\_\_

School: \_\_\_\_\_ Grade \_\_\_\_\_

If elementary, give classroom teacher's name: \_\_\_\_\_

PROVIDER SELECTED:      1<sup>st</sup> Choice \_\_\_\_\_

   2<sup>nd</sup> Choice \_\_\_\_\_

   3<sup>rd</sup> Choice \_\_\_\_\_

I give permission for contact information and assessment information for my child to be given to the Provider of my choice. \_\_\_\_\_

Parent Signature

If you have more than one child requesting SES, please put one child's name per enrollment form.

Please Print:

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

Home Address: \_\_\_\_\_ City, Zip \_\_\_\_\_

Please give the method(s) you prefer for the District and the Provider to contact you.

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

Cell Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Please do not send your child for these services until you receive confirmation from the School or Holmes District School Board's Title I Office.

If you require assistance, questions may be directed to:  
School Principal, School SES Facilitator or Mrs. Young, Title I Administrator, District Office  
850-547-5928, ext. 228