



ACADEMIC SUPPORT REFFERAL FORM

Grades 7-9

617-427-1545, x17
617-541-0550 – Fax
dlewis@metcoinc.org

PLEASE PRINT CLEARLY

DATE _____

STUDENT'S NAME _____

GRADE _____

METCO COMMUNITY _____

IEP? YES / NO

PARENT/GUARDIAN'S NAME _____

ADDRESS _____

CONTACT INFORMATION

HOME PHONE _____

WORK PHONE _____

CELL _____

EMAIL _____

STUDENTS IN GRADES 7-9 ARE SCHEDULED FROM 4:00-6:00PM

Maximum of two (2) days

___ MONDAY (Math) ___ TUESDAY (ELA) ___ WEDNESDAY (Math) ___ Thursday (ELA)

NOTE TO PARENTS/GUARDIANS

We are excited that your son/daughter will be enrolled in the after school academic support program. Please inform the METCO Director and the bus driver which days that he/she will be dropped off at METCO Inc. Students should come with a snack and come prepared to learn and participate. Your child will be receiving academic support in a small, multi-age group in reading, writing & math.

Any student who is absent ten (10) or more days will be dropped from our enrollment list.

If your child receives special education services, we are unable to provide academic support based on the specific goals in the individualized education plan (IEP). We offer academic support based on the grade level standards/expectations outlined in the common core in reading, writing, and math.