

Advanced Opportunities/Non-Credit Recovery Summer School Application  
**Application due to RHS Counseling Office by Friday, May 13<sup>th</sup>, 2016**

Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_ 8 in 6 Student: **Y / N**

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**\*\*\*We provide 2 options for classes taken over the Summer: IDLA or GradPoint\*\*\***

**GRADPOINT:**

- **Cost:** \$225 (**students only pay \$90 per class**) classes with A&B sections are \$90 each
- Students who enroll in the 8 in 6 program will be reimbursed for up to 2 classes
- **Date:** June 6<sup>th</sup> – June 30<sup>th</sup>
- **Time:** 8:00AM – 12PM and/or 12:30-4:30pm
- **Place:** Rigby High School – attendance is required until course completion

**IDLA (Idaho Digital Learning Academy):**

- **Cost:** \$90 per class (classes with A & B sections are \$90 per section)
- Students who enroll in the 8 in 6 program will be reimbursed \$75 for up to 2 classes
- **Date: June 13-August 19<sup>th</sup>**; finals week is Aug. 15<sup>th</sup> -19<sup>th</sup>
- **Time:** Students must dedicate 5-10 hours a week on their courses
- **Place:** Rigby High School will be available to those who would like work on their online courses in a monitored environment
- **Testing:** Students will be required to take proctored tests throughout the summer. Proctor is Barbara McMurtrey ([bmcsmurtrey@sd251.org](mailto:bmcsmurtrey@sd251.org) or 208-745-6693 ext. 1137) contact her directly to make IDLA testing arrangements during the summer.

**Special Education:**      **Yes**   or   **No** (If you are currently on an IEP or 504 Plan, please circle one and attach a copy of your accommodations to this form).

*Please list the class/classes you want to take, and circle either IDLA or GradPoint*

1. \_\_\_\_\_ **IDLA**   or   **GradPoint**

2. \_\_\_\_\_ **IDLA**   or   **GradPoint**

3. \_\_\_\_\_ **IDLA**   or   **GradPoint**

\_\_\_\_\_  
Parent/Guardian Signature      Date

\_\_\_\_\_  
Student Signature                      Date

\_\_\_\_\_  
Counselor Signature                  Date

**Counselor signature confirms 8 in 6**  
and confirms 8 in 6 reimbursement request

**Checks or RHS receipt of payment must be attached to secure a spot at summer school.**