Cienega High School
Spring 2017 SEP Intersession Program

Are you looking for a way to bring up your 3rd quarter grade? Check out Intersession!

ELIGIBLE STUDENTS: Cienega High School student **not passing** the SEP paper and/or SEP portfolio

LOCATION: Cienega High School, 12775 E. Mary Ann Cleveland Way

DATES: March 13th - 15th

TIME: 9:00 A.M. – 2:00 P.M., Monday - Wednesday

COST: FREE

TRANSPORTATION: Pick up a bus schedule from the CHS front office or visit the district website

LUNCH: Please bring your own lunch, the cafeteria will not be available

WHAT TO BRING: Notebooks, pens, pencils, and your Chromebook with charger

NOTE: Any student NOT passing upon the conclusion of the last day of SEP Intercession is subject to not participating in the graduation ceremony. Once the student is passing ALL components of SEP, they're free to enjoy Spring Break.

DISCIPLINE/ABSENTEE POLICY:
- Any student who presents a discipline problem will be dropped from the class.
- Any student who misses more than a half day (3 hours) per session will be dropped from the class.
- A dropped student will not receive a refund and will not earn credit.

CURRICULUM AND GRADING:

All classes will use a similar curriculum to what was given in the regular classroom. The highest and minimum grade required to pass SEP is a 70%. Students will receive tutoring and assistance to learn how to improve, in addition to receiving time to make those needed corrections. Once a passing score (70%) is earned, then Mr. Tritz will be notified and a "P" will be put on the student's transcript. NOTE: Intersession can only raise grades; it cannot lower them.

EXAMPLE: SEP Paper 50%
Intersession grade of 70%
Old: Transcript SEP Paper 50 F
Now: Transcript SEP Paper 50 F P

To register, return the bottom portion of this form to the 500 for Mrs. Matsushino.
For questions 879-2809. Classes are filled on a first-come, first-served basis.

---------------------------------------PLEASE DETACH BOTTOM PORTION-----------------------------------

Student Name: _____   Emergency Phone #: _____

Parent Name:_____

IEP/504?: YES/NO   If YES, Case Manager's name: _____

Please take all payments to CHS School Bookstore.