



Pinellas Park Middle School Extended Learning Program (ELP)

In order for your child to participate in ELP, please complete and return the entire application to the grade level counselor.

I would like my child, _____, to be enrolled in the before and/or after school Extended Learning Program. By enrolling my child in ELP, I acknowledge the following:

- ★ ELP is a voluntary program and by attending my child is expected to participate.
- ★ Transportation is not provided and the student must be picked up by 5:20pm, failure to do so may result in dismissal from the program.

Please circle the subject and days you would like your child to be enrolled. Please note if you would like your child to attend more than one subject, circle the day(s) they will be attending that subject.

<u>Reading</u> - Monday, Tuesday	7:45am-8:45am
<u>Reading</u> - Tuesday, Thursday	4:20pm-5:20pm
<u>Language Arts</u> - Tuesday, Thursday	7:45am-8:45am
<u>Civics</u> - Tuesday, Wednesday, Thursday	4:20pm-5:20pm
<u>Social Studies</u> - Tuesday, Wednesday	4:20pm-5:20pm
<u>Math</u> - Monday, Tuesday, Wednesday, Thursday, Friday	7:45am-8:45am
<u>Math</u> - Wednesday	7:45am-8:45am
<u>Math</u> - Wednesday	4:20pm-5:20pm
<u>Science</u> - Tuesday	7:45am-8:45am
<u>Science</u> - Tuesday, Thursday	4:20pm-5:20pm

How will your child get home? Walk Picked-Up

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____

Contact Number: _____

Date: _____