

Dates & Times

JUNE 16 - JULY 11, 2025

MONDAY - FRIDAY

8:30AM - 12:00PM



GREEN LAKE School Districts SUMMER PROGRAMMING





RETURN FORM BY: MAY 1, 2025



DATES & TIME

Summer School and Credit Recovery will run from June 16 - July 11.

School session Monday - Friday.

The Instructional day begins at 8:30 a.m. and ends at 12:00 p.m.

There will be **NO SUMMER SCHOOL** on July 4th.

IMPORTANT INFORMATION

Registration: Please complete a registration form for each child planning to enroll and return it to the school office or email all completed forms to Amy Dornfeld at dornfelda@glsd.k12.wi.us. When registering for classes, please use the grade level your child was in during the 2024 - 2025 school year. Registration materials can also be found on the school website at www.glsd.k12.wi.us.



IMPORTANT INFORMATION CONTINUED

<u>Health/Emergency Forms</u>: Must be completed for ALL students -- in and out of district. Forms must be submitted on or before the first day of summer school.

<u>Transportation</u>: Transportation is not available to or from summer school. You will need to make arrangements for drop off and pick up. If you are going to be late picking your child up, please contact your child's teacher or Amy Dornfeld at 920-294-6411, ext. 1125.

Attendance: Students are expected to attend summer school regularly. Please notify your child's teacher or call Amy Dornfeld at 920-294-6411, ext. 1125 if your child is going to be late or absent.

Snacks: Snacks will be available for your child during summer school. Please let your child's teacher know if there are any allergies or dietary restrictions.

<u>Fees</u>: Out-of-district students who attend summer school will be charged a \$60 per student supply fee for the summer session.

<u>Green Lake Site Boys & Girls Club</u>: Club programs will be coordinated with our summer school program so that students can easily transition into the planned afternoon activities held at the Green Lake School.

Photography: Projects and activities will be videotaped and/or photographed throughout the duration of summer school. These videos and photographs will be used for summer school promotional material (e.g. summer school informational packet, summer school flyers, summer school brochure, school website, school social media, etc.). If you do not wish for your child to be included in the videos and photos, please notify your child's teacher, Amy Dornfeld, and Katie James. Notification should be submitted in writing.



SUMMER INVESTIGATIONS

- Grades 4K 5
- Each Investigation will be a personal, in-depth experience that promotes active, collaborative, and meaningful learning.
- Project-based tasks will develop 21st century skills of creativity, communication,
 collaboration, and critical thinking.
- Literacy, science, social studies, and math standards will be embedded in the units taught.
- Differentiated instruction will be utilized to meet the needs of all learners.
- Community connections will be made to allow learning beyond the classroom.
- Students will enjoy learning that is challenging and fun at the same time.
- Designed to build math & reading comprehension, vocabulary and computation skills.
- Supports and reinforces strategies that enable students to make sense of a variety of reading texts and math problems.
- Focuses on improving study, organizational, and test-taking skills.
- Students will learn to think like mathematicians, readers, and writers.
- Students will gain knowledge in number sense and contextual clues while seeing how math and reading apply to their daily life.
- Helps bolster confidence in math & reading concepts.
- Helps to create a smooth transition into the next level of math and English study.







GREEN LAKE SCHOOL DISTRICT SUMMER SCHOOL REGISTRATION

RETURN TO THE GREEN LAKE SCHOOL OFFICE BY MAY 1, 2025

Student l	Name(please print)	
Student's	Grade Level During 2024-2025 School Year	
Please ind	icate the class you wish to enroll your child. Students sho level they were in during the 2024-2025 schoo	_
	SUMMER OF EXPLORATION	
	GRADE GROUPING	Х
	4K & Kindergarten	
	1st and 2nd Grade	
	3rd Grade	
	4th & 5th Grade	
Parent N	ame	
	(please print)	
Signatur	ePhone	#

2025 Green Lake Summer School Emergency Form

Student Name		Grade Birthdate	
Address			
Parent/Guardian #1			
Name		Phone	
Parent/Guardian #2			
Name		Phone	
Additional Phone Numbers:			
Two Local Emergency Contact People:			
Name1 st	Pho	ne2 nd Phone	
Name1 st	Pho	ne2 nd Phone	
Physician Name		Phone	
PLEASE INDICATE IF YOUR CHILD HAS ANY OF THE FOLLOWING HEALTH CONCERNS:	X	PLEASE INDICATE IF YOUR CHILD HAS ANY OF THE FOLLOWING HEALTH CONCERNS:	X
ADD/ADHD		Kidney Disease	П
Allergies (please list)		Language Concerns	
Arthritis		Migraines	
Asthma/Inhaler/Triggers:		Cardiac Problems	
Bee Sting Allergy		Diabetes	
Seizures/Convulsions		Orthopedic Problems	
Severe Allergic Reactions		Vision or Hearing Problems (Please list)	
Depression/Anxiety		Bipolar Disorder	
List any medications your child is currently taking, t	he pu	rpose, and dosage/frequency:	
Any other medical information we should be aware o	_		
-	f:		
	f:		
	f:		

Must Check one:				
My child has adequate hea	alth insurance to cover an	y injuries that may res	sult at school and does not need to)
purchase additional coverage.	Insurance Company			
My child does <u>NOT</u> have h	ealth insurance and I wou	uld like more informati	ion on how to purchase accident	
insurance.				
ibuprofen or acetaminophen) of parent or guardian in the origonal recommended therapeutic do	can be administered at sinal manufacturer pactorse in a legible format. your child to receive an	school is if "drug prockage, and the pack " To simplify, the so y nonprescription m	chool <u>cannot</u> provide any medic nedication, for any reason, you v	ation
I give the Green Lake School phospital as needed.	ermission to provide en	nergency medical at	tention to include transport to l	ocal
Parent/Guardian				
Signature		[Date	



2025 Summer School SCHOOL DISTRICT OF GREEN LAKE PARENT/GUARDIAN CONSENT FORM FOR WALKING FIELD TRIPS

I, as pare	ent/guardian of	do hereby grant my permission and		
consent	for my child to participate in the field trip	or extracurricular trip described below:		
Field Trip	o: Walking Field Trips			
Time: Re	gular School Hours			
In grantii	ng such permission and consent, we			
1.	Acknowledge and assume full response caused by our child or ward during such	sibility for any and all damage to person or property activity.		
2.	2. Expressly authorize emergency medical or dental treatment deemed necessary by the school district, its agents, and employees during such activity.			
3.	3. Expressly agree that in the event that any disciplinary action or the health of my child requires that my child be returned home during such activity that such return shall by accomplished at our expense.			
and effec	ct. We acknowledge and understand that	carefully read this statement and understand its impact if we have any questions in regard to this statement red and further explained to us prior to our signing.		
Student	Name (Print)	Grade Level		
Parent/0	Guardian (Print)			
Signature	e of Parent/Guardian	Date		

