

STUDENT APPLICATION

SUMMER 2010

JUNE 7 – JULY 16, 2010

8 am – 5 pm Daily

St. Richard's School

33 East 33rd Street

Indianapolis, IN 46208



HORIZONS IS AN ACADEMIC SUMMER CAMP

**ACCEPTED STUDENTS WILL DO SCHOOLWORK AND OTHER
ACADEMICALLY RELATED WORK DURING THE SIX WEEKS OF
THE HORIZONS PROGRAM**

**PLEASE DO NOT ENROLL STUDENTS WHO DO NOT KNOW THEY
ARE ENTERING AN ACADEMIC SUMMER CAMP!**

Phone: 317-921-1040

Fax: 317-921-1046

<http://www.horizonskidsnational.org/html/strichards.html>
horizonsindianapolis@hotmail.com

Dear Interested Horizons Family:

Thank you for your interest in the Horizons Urban Student Enrichment Program. **OUR PROGRAM GIVES FIRST PRIORITY TO IPS (Indianapolis Public School) Students** – But accepts out of IPS (Private School and Township) Student Applications Beginning on April 1st each year.

We appreciate your interest in our **academically** based program and ask you thoroughly read the following materials **BEFORE** registering your students for our program for this summer. Please do not register late and expect your students to immediately enter the Horizons Program. **Families who apply late will be reviewed through the same process as those who applied on time – but much later in priority than those who applied on time.**

Horizons is an enrichment program designed to promote the potential of a diverse population of children from low-income families. Guided by a professional faculty in a nurturing environment, the program emphasizes academics, the arts, intramural sports and social growth. Horizons is committed to the development of the whole child through experiences that enhance self-esteem, foster awareness of community responsibility, build problem solving skills, and encourage a life-long interest in learning.

Our program is not for all students. We are interested in hosting students who are struggling academically and would like help or students who are doing well academically and would like to continue on the path toward college. Our program is **not** designed for the following youth:

- Students with behavioral problems (Disrespect for authority)
- Student who are not interested in doing better in school.
- Students who want to pick and choose the activities they like.
- Students who require a “day care” type scenario.

The following behavioral issues will not be tolerated:

- Sleeping in class
- Fighting
- Theft of any kind
- Disrespecting authority
- Improper dress

Should your student be sincerely interested in improving academically, please complete all attached forms, and send them in an envelope before May 15. Students who meet Horizons’ standards are admitted on a first-come, first-serve basis- there are only 12 spots per classroom (K-8). Please submit application materials as soon as possible, as particular grade levels may reach capacity well before the application deadline.

Students are placed in the **classroom grade they recently completed** in the most recent school year (e.g., first graders go back into the first grade classroom at Horizons)

Our program runs from **8 am – 5 pm each day**. **WE DO NOT** accept any student before 8 am, unless prepaid before and aftercare forms are completed and WE DO NOT keep students past 5 pm. Please pick up your student before 5 pm or you will receive a \$25 per minute charge for every minute after 5 pm you do not pick up your child.

- **All program applications should include correct fees according to Horizons 2010 fee scale.**
- **After May 14 late registration fees apply– regardless of additional students per household.**
- **Program fees WILL NOT BE refunded under any circumstances.**
- **On time Horizons applicants are accepted at a 99% rate.**

NOT ALL STUDENTS WILL BE ACCEPTED DUE TO EXTENUATING AND INDIVIDUAL STUDENT CIRCUMSTANCES. LETTERS OF ACCEPTANCE WILL BE MAILED BY JUNE 1st.

Horizons Urban Student Enrichment Program

2010 FEE SCALE

Summer 2010
June 7– July 16, 2010
8 am– 5pm Daily
St. Richard's School
33 East 33rd Street
Indianapolis, IN 46208

**Indianapolis Public Schools
(IPS)**

Before May 14, 2010

\$110 per student

\$85 for each additional student per family household*

Scholarships are available for those who qualify due to income.

After May 14, 2010

Late Registration Fee of \$160
Flat fee for students regardless of family relationships*

After May 31, 2010

Late Registration Fee of \$200
Flat fee for students regardless of family relationships*

**Private, other public &
non-Marion Co. Schools**

Before May 14, 2010

\$250 per student

\$110 for each additional student per family household*

Scholarships are available for those who qualify due to income.

After May 14, 2010

Late Registration Fee of \$300
Flat fee for students regardless of family relationships*

After May 31, 2010

Late Registration Fee of \$350
Flat fee for students regardless of family relationships*

All application materials must be turned in by the above deadlines or you will be subject to a \$50 processing fee

Family household does not include who do not live with the family during the regular school year (i.e. cousins, nephews, niece, etc.)

DO NOT TURN IN AN INCOMPLETE APPLICATION!

**Horizons Urban Student Enrichment Program
FORM OF PAYMENT SHEET**

Indianapolis Public School (IPS)?	YES	NO
Private, Other public, & Non-Marion County School?	YES	NO

Please Circle one of the following Dates:

Before May 14th, 2010 After May 14th, 2010 After May 31st, 2010

Number of Students in family household included in this payment? _____

Payment Information

_____ *Check*

Total Check Amount: \$ _____

Check # _____

_____ *Credit/Debit Card*

Total Check Amount: \$ _____

Card # _____

Exp. Date: _____

Signature Code: _____

Billing Address Zip Code: _____

Debit? _____ *Credit?* _____

Horizons Urban Student Enrichment Program
EMERGENCY CONTACT FORM

Child's Name: _____

Name of Parent/Guardian: _____

Name of Medical Physician and Office: _____

Medical Physician Number: _____

Allergies to Food: YES NO
If yes, please list: _____

Allergies to Medications: YES NO
If yes, please list: _____

Medical Illnesses: YES NO
If yes, please list: _____

If a circumstance were to arise that your child would need pain reliever, they can be given:
(please circle) Advil Tylenol

EXTREME EMERGENCY CONTACT:

Name: _____ Number: _____

Horizons Urban Student Enrichment Program PERMISSION FORM

Student's Name _____ Birth date _____

Address _____

City _____ State _____ Zip _____

1. I give permission to my child's school to release the following annual school records to the Horizons Student Enrichment Program (if within the past 3 years): Academic (Grades and comments), Health, Attendance, and Psychological (within last 3 years), other (specify):
_____.
2. I am aware that I may review or challenge the records prior to their release. This permission to release information to Horizons about my child is to be in effect for the duration of his/her enrollment in the Horizons Program and for the duration of his/her high school years.
3. I give permission to Horizons for my child to participate in and be transported to and from field trips, camping, and any other special events.
4. I authorize pictures and quotes of my child to be taken during Horizons to be reproduced for use in media and publications.
5. I give permission for my child to take part in all summer program activities including trips away from the school premises, and hereby release the Horizons Student Enrichment Program and St. Richard's School-Indianapolis from liability to me or to my child for any loss or damage sustained by me or my child because of an injury to my child while at Horizons, during any Horizons activity, or while being transported to and from Horizons.

Signature _____

Relationship to Child _____

Date _____

CURRENT SCHOOL NAME _____

Horizons Urban Student Enrichment Program
RELEASE OF LIABILITY

Completion of this release is required. **STUDENTS WILL NOT BE ADMITTED WITHOUT THIS FORM.**

I _____ have voluntarily applied, as parent of a registered child, to participate in the Horizons Urban Student Enrichment Program for six weeks at St. Richard's School in Indianapolis, Indiana.

I understand that there are risks of injuries related to summer camp activities that are my responsibility as a parent. I assume these and all risks for my child during his/her participation in the Horizons Urban Student Enrichment Program.

Please initial _____

I agree as consideration for my child being permitted to participate in the Horizons Urban Student Enrichment Program not to sue Horizons-Indianapolis, Horizons National (State of CT), St. Richard's School, its head of school, officers, directors, assigns, agents or employees, or sub-contractors who will provide educational services to the Horizons Urban Student Enrichment Program for injury or death resulting from participation in the Horizons Program and related activities, regardless of the cause, including negligence.

Please initial _____

I agree to defend, indemnify and hold harmless the Horizons Program, camp organizers, staff sponsors, grantors and any of the associated officers, agents or employees for injury or death resulting from participation in the Horizons Urban Student Enrichment Program and related activities, regardless of cause, including negligence.

Please initial _____

I have read this agreement fully, and understand it. I am aware that this agreement is binding on my heirs and assigns, and that I am releasing certain legal rights that I otherwise may have.

Please initial _____

Signature: _____

Date: _____

Horizons Urban Student Enrichment Program

RULES FORM

If my child is accepted into the Horizons Urban Student Enrichment Program for this summer, I will make certain, we, as a family, have read and will discuss the following program rules before they attend the Horizons program:

- Improper Clothing & Dress is NOT permitted:
 - No Sagging Pant- Male students must wear belts daily
 - No hats, "head wraps, or hoods or other distracting clothing are allowed in the Horizons Program
 - Inappropriately dressed female participants will be sent home for the day
- ELECTRONICS ARE NEVER ALLOWED IN OUR CAMP!
 - Video games of any type, cellular phones, MP3 Players are NOT PERMITTED; unless related to a classroom assignment.
- Theft & Possession of stolen property will not be tolerated.
- Program officials will not tolerate disrespect of:
 - Other students (fighting, bullying, or other unacceptable behavior)
 - Teachers
 - Administrators
 - Field Trip Administrators
 - St. Richard's School Property
- ZERO TOLERANCE FOR ANY INAPPROPRIATE BEHAVIOR AND INAPPROPRIATE SEXUAL BEHAVIOR
 - Child will be sent home IMMEDIATELY, and may return to camp as decided by Executive Director and/or Camp Director
- System of Discipline
 - First rules violation:
 - Environmental Experience
 - No Field Trip (next scheduled)
 - Second rules violation:
 - Program removal for the day – transported to parent's place of work.
 - Two Missed Field Trips (next two scheduled)
 - Third rules violation:
 - Permanent program removal - no return thereafter

All students are expected to arrive by 8:55a.m. every morning. The tardy policy is as follows:

- 1st Tardy: Student will be excluded from after school programming
- 2nd Tardy: Student will miss the next scheduled class field trip
- 3rd Tardy: Student will be sent home with parents

** If you know your student is going to be late, please call the Horizons office.

As a parent, I will work with my student to help them understand these rules and seek to be involved in the program as a volunteer, when my schedule affords an opportunity, in any capacity which will enrich the educational experience for my student and the Horizons Program.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

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Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

Horizons Urban Student Enrichment Program TEACHER RECOMMENDATIONS

Horizons Program
Teacher Recommendation
(Two Recommendation Forms Required)

Student Name: _____ Grade: _____

The aforementioned student is applying for admission to the Horizons Program which is a year round academic program for public school students. Please provide your answers to the following questions, on a separate sheet of paper, to help us with admissions decisions for this summer. **Student's application will not be reviewed if any parts of this recommendation is missing.**

1. Please tell us the aforementioned student's academic strengths and weaknesses:
2. What behavioral issues do you encounter in working with this student?
3. Does this student display "backtalk", "a smart-mouth" or any physical reactions (Rolling eyes, "talk to the hand", neck rolling, etc.) when responding to authority? If yes, please explain.
4. Please tell us about this student's overall attitude toward academics and school work.
5. Do you recommend this student for the Horizons Program? YES NO

Name of Recommender: _____

Position: _____

School: _____

Phone Number: _____

Please confidentially return this form to student. Please call 317-921-1040 should you have questions regarding our program.

**** Form MUST be in a sealed and signed envelope.**



Horizons Urban Student Enrichment Program
TEACHER RECOMMENDATIONS

Horizons Program
Teacher Recommendation
(Two Recommendation Forms Required)

Student Name: _____ Grade: _____

The aforementioned student is applying for admission to the Horizons Program which is a year round academic program for public school students. Please provide your answers to the following questions, on a separate sheet of paper, to help us with admissions decisions for this summer. **Student's application will not be reviewed if any parts of this recommendation is missing.**

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Horizons Urban Student Enrichment Program
STUDENT ESSAYS

On a separate sheet of paper, students must answer the following questions. Students not providing all application materials will not be accepted.

JUNIOR STUDENTS: Grades K-3
MUST BE HANDWRITTEN BY STUDENT

Question #1

Why do you want to attend the Horizons Urban Student Enrichment Program?

SENIOR STUDENTS: Grades 4-8
MUST BE TYPED

Question #1

In exactly 50 words tell us why you should be invited to participate in the Horizons Urban Student Enrichment Program?

Question #2

In no more than 250 words, answer the following question:
What are your academic goals and how can attending the Horizons Program help you obtain those goals?

Horizons Urban Student Enrichment Program
APPLICATION CHECK LIST

BEFORE YOU SEND THIS APPLICATION MAKE SURE EVERYTHING IS INCLUDED!

ACCEPTANCE WILL BE DELAYED AND **CAN BE DENIED** IF YOU ARE LATE WITH ANY INFORMATION IN THIS PACKET.

- Annual Student Information Form (*no blanks*)
- Emergency Contact Information Form (*no blanks*)
- Permission Form (*no blanks*)
- Completed Release of Liability (*no blanks*)
- TWO (2) Rules forms SIGNED BY PARENT and STUDENT
- Completed Essay(s)
- Most Recent Grade Report
- TWO (2) Teacher Recommendations– In a signed, sealed envelope
- Form of Payment
- All parts of application in a 9x12 envelope

Reminder: Only IPS students may register before April 1st *unless you are a returning Horizons family.*
Registration is open to all students beginning April 1st.

PLEASE DO NOT register students who will miss portions of the Horizons Program due to vacations. Students who miss any portion of the program due to vacations will not be allowed to return.

Application fees will not be refunded under any circumstances.

Please consult with the Executive Director with regard to any vacations that are previously scheduled and include a letter stating the days your vacation is scheduled.

THANK YOU

THE HORIZONS PROGRAM
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Indianapolis, IN 46208
Fax: 317-921-1046

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