

Sabin SUN School Class REQUEST Form

Student Name _____ Student grade: _____

Students may register for a maximum of 3 classes. PLEASE NOTE: This is just the REQUEST FORM. If your student is picked in the lottery you will receive a SEI Enrollment form that will need to be filled out and returned to the SUN box in the main office. Request forms must be turned in to the SUN box in the main office by 9am Monday, December 9th.

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| MONDAY 3:15-4:30 1 st choice _____ 2 nd choice _____ 4:30-5:15 1 st choice _____ |
| TUESDAY 3:15-4:30 1 st choice _____ 2 nd choice _____ 4:30-5:15 1 st choice _____ |
| WEDNESDAY 3:15-4:30 1 st choice _____ 2 nd choice _____ 4:30-5:15 1 st choice _____ |
| THURSDAY 3:15-4:30 1 st choice _____ 2 nd choice _____ 4:30-5:15 1 st choice _____ |

Student Information

| | |
|--|-------------------------------------|
| Student Name _____ | Date of Birth _____ / _____ / _____ |
| 19/20 Teacher _____ | |
| Email Address _____ | Phone _____ |
| I have read and understand the Behavior Agreements and Late Pick-up Policy: | |
| Parent/Guardian signature: _____ | |

