



**Summer 2017
Pleasant Grove High School
Summer School Program**

Enrollment Form

Student's Name _____ School ID # _____

Last Grade Completed _____ Home Campus _____

Parent's Name _____

Home Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Parent's Email Address _____

Course(s) Needed: *To be completed by School Counselor*

Course Title _____ Semester 1 or Semester 2 or both (circle)

Course Title _____ Semester 1 or Semester 2 or both (circle)

Course Title _____ Semester 1 or Semester 2 or both (circle)

of Semester Credits (_____) X Course Amount (\$ _____) = Total Due (\$ _____)

(\$150 per 1/2 credit) In-District Tuition

*Deadline for Summer Registration due
Thursday, June 1st at 4pm*

Payment should be made to PGISD

TOTAL PAID \$ _____

Grade Level Counselor Signature

Parent Signature

Student Signature