

Receipt Number_____

School District of Haverford Township

Summer School - 2023

NON-RESIDENTS OF HAVERFORD TOWNSHIP

APPLICATION FOR REPEAT CREDIT COURSES

Course:_____ Date:_____

Student's Name:_____

Address:_____

Phone:_____

School last attended:_____

This year I was in grade_____ I have an IEP: YES _____ NO _____

To what school should summer school credits be sent? _____

GENERAL INFORMATION: (Please read carefully)

- A fee of \$340.00 will be charged for a repeat credit course. There will be no refunds unless the class is canceled. Fees may be paid by cash or PayPal, or check or money order payable to **THE SCHOOL DISTRICT OF HAVERFORD TOWNSHIP**. Payment can be mailed to: Haverford High School, 200 Mill Road, Havertown, PA 19083, % Ms. Patti D'Orazio.

Signature of Parent/Guardian

Emergency Contact #

Parent/Guardian Email

Student Email