

Clifton Public Schools
Christopher Columbus Middle School
350 Piaget Avenue
Clifton, New Jersey, 07011
973-470-2360
www.clifton.k12.nj.us

Susan E. Peters
Principal

Jeff Labriola
Administrative Intern

Afterschool Academy

Dear Parent:

Afterschool Academy is underway; however it is not too late to sign your child up for this outstanding program. Students receive additional support with their homework, enrichment in Language Arts and Math and preparation for the NJASK test this spring. Study skills are stressed by the staff to enhance your child's existing knowledge and to help cultivate independent learning. The program meets Tuesday, Wednesday and Thursday from 3:00-5:30pm. Parents are responsible for transporting their child home from the program. Students who wish to go to remedial or a club meeting first may do so and then report to the Afterschool Academy at 3:30

Please do not hesitate to contact your child's academic team or guidance counselor with any questions or concerns. This is a free program offered to the students of Christopher Columbus Middle School, please be sure to take advantage of this great opportunity.

Below are listed the enrollment dates, for the coming year.

December 6, 2011
January 17, 2012
February 14, 2012
March 20, 2012

To enroll your child, simply print the attached form, complete the information and return to the Main Office here at CCMS.

Clifton Public Schools CCMS After School Academy

Your child, _____ is recommended for extra help in the following subject(s) in addition to homework.

Grade level: _____ Language Arts _____ Math: _____ Other: _____

The program is scheduled from 3:30 pm until 5:30 pm.

You child's start date will be: _____.

If your child is to be excused from tutoring you must send a note to Ms. Sarduy.

Thank you,
CCMS After School Academy Directors 973-470-2360

Please sign and return this notice.

_____ **No, my child will not attend because** _____
_____. (transportation, etc.)

*****Parent Signature: _____

_____ **Yes, my child will attend.**

If yes, please complete the bottom half of the form.

Student must attend a minimum of two days, please check which days.

_____ Tuesday _____ Wednesday _____ Thursday

Students may stay after school all three days if given permission.

****Parent signature**

Daytime Telephone number

Other contact information

Cell phone number

Emergency Contact name

Emergency Contact number

** _____ I give my child permission to walk home after tutoring.

Children must be picked up or given permission to walk home or they will not be able to stay for tutoring in the future

Please return this form by _____ to Ms. Sarduy

*****See back*****