Text

Description automatically generated with medium confidence

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| **Student Enrollment Application** | |
| I would like to enroll my son/daughter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the Learning Cove’s free tutoring reading program. | |
| Parent/Guardian Name(s) |  |
| Address |  |
| Phone No/s. | (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Student’s Current Grade in Tecumseh Public Schools |  |
| Child’s Teacher |  |
| Building |  |
| This tutoring program is available to students whose family can demonstrate an economic need. Check all that apply:  Free or Reduced Lunch \_\_\_\_\_\_\_\_\_\_ Aid to Dependent Children \_\_\_\_\_\_\_\_\_\_  MICare \_\_\_\_\_\_\_\_\_\_ MIChild \_\_\_\_\_\_\_\_\_\_  Other (Please explain): | |
| Please return this application form to your child’s classroom teacher or their school’s reading specialist. **The Learning Cove will contact you to set up a meeting date.** If you have specific questions regarding this application or the program, please call Lynn Raine, Reading Specialist at (269) 274-1516 OR email [thelearningcove1@gmail.com](mailto:thelearningcove1@gmail.com). We look forward to meeting you and enrolling your child. | |
| Signed: | Date: |