

# Nashua School District

# Fall 2020

## Competency Recovery Registration Packet



**Grades 9-12 Fall 2020 Competency Recovery Program Information:**

All recovery will be completed during the months of October-December. Classes are held during early release.  
All classes start the week of Monday October 19<sup>th</sup> from 3:00 pm - 5:00 pm in the Media Center of the High School.

<u>North Media Center</u>	<u>Day</u>	<u>South Media Center</u>
<b>Science:</b> Suzanne Taylor	Monday	<b>Science:</b> Kathryn Coban <b>English:</b> Michael Linehan <b>ELL:</b> Deb St. Laurent
<b>English:</b> Sam Watkins	Tuesday	<b>Spanish:</b> Jen Campo
<b>SS:</b> Cherrie Swan	Wednesday	<b>Math:</b> Jothan Massey
<b>Math:</b> Kara Swedlow	Thursday	<b>SS:</b> Sabin Wenger

**Fall 2020 NASHUA COMPETENCY RECOVERY PROGRAM**  
**Monday October 19<sup>th</sup> through Wednesday December 2<sup>nd</sup> 2020**

1. Students who receive a final grade of an “NC” in a school year 2019/2020 class, are eligible to enroll in the competency recovery program. Students are able to recover up to TWO competencies per course. Not to exceed 50% of competencies
2. All students will meet with the recovery teacher to create a recovery plan. Students and teachers will meet once per week for five weeks to complete the recovery plan. Additional time can be arranged and students are expected to attend the program on those days. (See attendance policy below).
3. Students should speak with their guidance counselor for forms and information. All registration forms and money will be **due October 12th**. Checks are made payable to the Nashua School District.

**ATTENDANCE POLICY:** Attendance at all sessions is mandatory until the teacher dismisses students for completion of all work. No refunds will be available once the sessions start. Attendance is **not a guarantee** of successful completion. **Students work must demonstrate competency to receive credit.**

**DISCIPLINE POLICY:** Students are subject to the Nashua School District’s Board of Education approved Student Behavior Standards.

**TRANSPORTATION:** Parent and/or Student Responsibility - City Bus Passes are available.

**FEES**

**\$25.00 Administrative fee per Competency being remediated**  
**Students on free/reduced lunch \$15 per competency being remediated**  
Please make check payable to the NSD Competency Program

**REFUNDS WILL NOT BE MADE AFTER October 12th**

**Students please keep this page**

**Return Registration form to Nashua Adult & Community School office  
at NHS North in Room A106 or NHS South in Room C2003**

**Due Monday, October 12, 2020**

**Renée Santos (603) 966-2420**

**Fall 2020 NASHUA COMPETENCY RECOVERY PROGRAM**  
**Monday October 19<sup>th</sup> through Wednesday December 2<sup>nd</sup> 2020**

**REGISTRATION FORM**

**ALL COURSE FEES MUST BE PAID WHEN REGISTERING.** Checks are made payable to the NSD Competency Recovery Program.

NAME OF STUDENT: \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_  
(Last Name) (First Name)

Can you attend in person: YES NO

NAME OF PARENT/GUARDIAN: \_\_\_\_\_ DAYTIME PHONE #: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

GRADE **NOW**: \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_ TEL. NO.: \_\_\_\_\_

IN CASE OF EMERGENCY WHOM MAY WE CALL? \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

**PAYMENT RECEIVED FROM:** \_\_\_\_\_ **Amount \$** \_\_\_\_\_ **Check#** \_\_\_\_\_ **Cash \$** \_\_\_\_\_

Course: \_\_\_\_\_ Original Teacher \_\_\_\_\_

Competency to be recovered: \_\_\_\_\_

Course: \_\_\_\_\_ Original Teacher \_\_\_\_\_

Competency to be recovered: \_\_\_\_\_

**All recovery will be completed by December 2, 2020.**

**All classes start the week of Monday October 19th from 3:00-5:00 pm in the Media Center of the High School.**

**Please fill in box for state data collection. Our funding depends on it.**

**Data Collection:** The State of New Hampshire requires that we collect data on our adult education program. This information will be kept confidential and used to help improve our programs.

Latina: yes no

Ethnicity:(circle all that apply) White Asian Black Native American Pacific Islander

Employment: Employed – Employer Name \_\_\_\_\_ Hourly Rate \_\_\_\_\_

Unemployed Not in Labor Force

Disabled: Yes No Public Assistance: Yes No Residence: Rural Area Yes No

Primary Goal: \_\_\_\_\_ Enter Employment \_\_\_\_\_ Retain Employment \_\_\_\_\_ Obtain Diploma

\_\_\_\_\_ Prepare for college \_\_\_\_\_ Personal Enrichment \_\_\_\_\_ Other

**GUIDANCE COUNSELOR SIGNATURE:** \_\_\_\_\_

**STUDENT SIGNATURE:** \_\_\_\_\_

**PARENT SIGNATURE:** \_\_\_\_\_