

Davis Intermediate School Evening School

Student's Name: _____

Parent's Name: _____

Today's Date: _____

Date of Assigned Evening School: _____ **Times: 3:15-6:00**

Name of Teacher and subject area:

Teacher

Subject

Assignments To Be Completed:

1. _____

2. _____

Students may be assigned Evening School to make up zeros on classroom assignments. Students may make up 2 zeros per class per six weeks. The highest value your child can earn on the assignments is 70%. Sessions are Friday evenings from 3:15-6:00 and will be held at Davis Intermediate School. Your child is expected to stay the entire session. (Evening school will be held on Thursday the last week of the six weeks for grading purposes.)

Student's Signature: _____

Parent's Signature: _____

Phone Number: _____

(Please list a phone number where you may be reached while your child is attending evening school)