



2019 EISD Dyslexia Summer Reading Program

DATES: WEEKLY, MONDAY – THURSDAY, June 10-27 and July 15-Aug 1

TUITION: \$150 PER WEEK

TRANSPORTATION: PARENT PROVIDED

GROUP MEETING TIMES (determined by current Wilson Step):

Foundations or Wilson Steps 1 - 3 Group I: 8:15 am- 9:15 am

Wilson Steps 4 - 5 Group II: 9:30am-10:30 am

Just Words or Wilson Steps 6 - 10 Group III: 10:45am-11:45am

LOCATION: Valley View Elementary
1201 Loop 360 South
Austin, TX 78746

PROGRAM INFORMATION

Students currently receiving Dyslexia services in Eanes ISD are eligible to attend the Dyslexia summer reading program. The summer 2019 **small** groups will be for students who were in grades K – 5 during the 2018-2019 school year. The groups will be offered daily, **Monday through Thursday**. Students will be divided into small groups dependent on their Wilson Reading Step, and this will determine what time they should arrive. The students will work on maintaining current skills, improving fluency, and increasing depth of comprehension. All instructors will be Wilson Certified teachers who work in Eanes ISD.

The program is designed to provide additional practice for **students with Dyslexia** through the summer. Instruction will be based on individual student needs assessed by the Dyslexia teacher as well as the classroom teacher. Some adjustments in session times may be made in collaboration with parents to facilitate the most effective small groups and accommodate needs.

Please return your registration to your campus Dyslexia teacher or mail your registration to:

**2019 EISD Elementary Summer Academy
Attention Dyslexia Registration
Curriculum, Instruction & Assessment Dept.
601 Camp Craft Road
Austin, Texas 78746**

Return the Registration form no later than Tuesday, May 14, 2019

EXPECTATIONS

ATTENDANCE

Regular school attendance guidelines will apply. Students will be met each day, prior to class, to gather and walk to their class with their teacher. Being on time is important as stragglers will cause a delay in the start time for classes. A note is required to enter class if the student is absent for any reason. If, for any reason a student must leave class, she/he must check out through the summer school principal's office.

SNACKS

Students are encouraged to bring nutritional snacks from home. Students will be allowed to eat snacks during this break.

TRANSPORTATION

Each student is responsible for his/her own transportation. Every student is to be picked up immediately after classes end, unless he/she participates in an afternoon community education program on the academy campus. No supervision is available before or after classes otherwise.

DRESS CODE

Students should dress in a manner that is clean and neat and that will not be a health or safety hazard to themselves or others. Dress code standards for the regular school year will apply.

CONDUCT

Students are expected to comply with all elementary school conduct requirements outlined in the *2018-19 Student Code of Conduct Handbook*.

EMERGENCY

In case of emergency, please contact your child's Summer Academy teacher via school email/phone contact that will be provided by the teacher. You can also reach the Summer Academy Principal, Michael Buthe by calling 512-732-9140, Valley View Elementary or email mbuthe@eanesisd.net, or the Curriculum, Assessment, and Instruction Department (512-732-9020) if needed.

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For questions regarding registration, please call the Curriculum, Instruction and Assessment Department at 732-9020 ext. 20401

Parents/Guardians will receive verification of the summer meeting schedule during the last week of May.

EISD REGISTRATION FORM

2019 EISD DYSLEXIA SUMMER READING PROGRAM

The completed form and your check, made payable to 2019 EISD Elementary Summer Academy, are due by **Tuesday, May 14, 2019.**

Please return this form and your check to your child's teacher or mail to:

Eanes ISD - 2019 Elementary Summer School
Curriculum, Instruction, and Assessment Department
601 Camp Craft Road
Austin, TX 78746

Parents/Guardians, please print the following information:

Student's Name: _____

Address: _____ Zip code: _____

Parent(s) Name: _____

Email Address: _____

Home Phone: _____ Cell Phone _____

Work Phone: _____

Health Alerts:

Student's current (2018-2019) grade level: _____

Home Campus: _____ Homeroom Teacher: _____

Emergency Contact: (Required)

Name: _____ Phone Number: _____

WEEKS SELECTED to ATTEND MONDAY-THURSDAY

_____ June 10-13 _____ July 15-18
_____ June 17-20 _____ July 22-25
_____ June 24-27 _____ July 29-Aug 1

GROUP MEETING TIME by Wilson Step

Consult the Dyslexia teacher or leave blank

_____ Steps 1 - 3 8:15-9:15
_____ Steps 4 - 5 9:30-10:30
_____ Steps 6 - 10 10:45-11:45

Number of Weeks _____ **X \$150 per week =** _____ **Total Fee Enclosed-Check #** _____

Dyslexia Teacher Complete the Following:

Dyslexia Teacher Verification (current Wilson Step): _____

Student Strengths: _____

Student Goals: _____

Summer Contact Information: _____