

Summer Enrollment Application

1838 Waukegan Rd., Glenview, IL 60025

Phone (847) 834-0791

www.ilearnacademy.net

Student Profile				Today's Date:	/	/
Nama				1		
Age:	Date of Birth:			Male	Female)
Upcoming Grade Lev	vel:	School Attending	:			
Parent/Guardiar	n Profile					
Name:				·		
Address:		(City, State, Zip:			
F-mail:			Primary Phon	e:		
		hold (names and grades)				
Please list any other	children in your nouse	noid (names and grades)	·			
Summer Goals						
Please choose your	child's summer acader	nic objectives (select all t	hat apply):			
Avoid Summer Le		Create a Balanced		Get Ahead of	Grade Leve	el
Catch-Up with Gr	ade Level Reading			Get Ready for	PSAT 8/9	
Catch-Up with Gr	ade Level Math	Learn Organization	& Study Skills	Get Ready for	PSAT	
Do you have any other	er summer academic ç	goals?				
Transportation						
Would you be interest	ested in car-pooling?	Yes	No			
Do you have any con	nflicts this summer or o	ther considerations we sl	nould be aware of?			
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Summer Programs					
Four Half-Day Academic Program (Math, Reading Comprehension, Writing, Test Prep.):					
Monday – Thursday, 9 am – 12 pm					
Two Half-Day Academic Program (Math, Reading Comprehension, Writing, Test Prep.): (Register by May 18th and save \$50 plus receive Skill Practice/Test Prep Gym for free!)					
Monday/Wednesday, 10 am – 12 pm or 1 - 3 pm or 4 - 6 pm					
Tuesday/Thursday , 10 am – 12 pm or 1 - 3 pm or 4 - 6 pm					
Add Skill Practice/Test Prep Gym:					
■ Monday - Thursday, 9 am – 10 am or 12 - 1 pm					
Single Subject Classes					
Choose a Subject: 1. Math: Gr. 1 - 2 Math Gr. 3 - 4 Math Gr. 5 - 6 Math Gr. 6 - 7 Math Pre-Algebra Algebra Geometry Algebra II Pre-Calculus 2. Reading Comprehension & Vocabulary: Elementary gr. 1 - 3 Elementary gr. 4 - 6 Middle School gr. 7 - 9 High School gr. 10 - 1 3. Writing & Grammar: Elementary gr. 1 - 3 Elementary gr. 4 - 6 Middle School gr. 7 - 9 High School gr. 10 - 1 Preferred Days and Time: Monday/Wednesday: 10 am - 12 pm 1 - 3 pm 4 - 6 pm Tuesday/Thursday: 10 am - 12 pm 1 - 3 pm 4 - 6 pm Friday: 10 am - 12 pm 1 - 3 pm 4 - 6 pm					
Testing/Diagnostic (Office Use Only)					
Test Date/Time: Test Method:					
Score: Evaluated By:Recommended Group & Time:					
Follow-Up Notes:					