READING - FLEMING INTERMEDIATE SCHOOL LEARNING LAB

The Learning lab provides a quiet environment that enables students to access library resources and teaching staff to assist with school work, projects, research, review and study.

Important facts to know:

- Students are accepted into learning lab only with a signed permission slip from a parent.
- Students may enroll at any time and drop out at any time during the year with written permission from a parent or guardian. Students may attend more than one session of Learning Lab per week.
- Students must bring materials and schoolwork with them to Learning Lab.
- Students may use library computers as a resource for their academic success.
- Learning Lab is offered 3 afternoons per week and 2 mornings per week on a continuous basis throughout the school year, on the following schedule, with the exception of winter & spring breaks, holidays & early dismissal days. Please Note: Learning Lab is not scheduled on snow contingency days.
 - ✓ Session 1 September 23, 2019 December 19, 2019
 - ✓ Session 2 January 6, 2020 March 12, 2020
 - ✓ Session 3 March 23, 2020 June 4, 2020
- If the student does not conduct himself/herself in a respectful manner with proper behavior, the parent will be contacted. Disciplinary action will include the student being denied permission to attend the Learning Lab.
- Parent or Guardian will be responsible for the drop off and pick-up located in front of RFIS. Learning Lab ends at 4 p.m., and students must be picked up promptly at 4 p.m. Parents who are late picking up will be given one warning. Continued lateness will be cause for the student to be dismissed from the program.
- If the child attends the YMCA before or after care programs, parents are responsible for notifying the YMCA of the days and times the child will be attending learning lab.

Morning Session
(7:00 – 8:00 a.m.)

No Monday a.m. Session
Tuesday
Wednesday
Wednesday
Please check the appropriate box for day and time your child will attend.

Student's Name – Please print:	Homeroom Teacher:		
Parent/Guardian Signature:		Date:	
Parent contact phone number(s) dur	ing Learning Lab session ti	me:	
Parent e-mail address:			
Emergency contact during Learning I	Lab session time:		
Name (Please print):	Relation	Phone No.	