

BOSQUE SCHOOL

2010 WINTERIM PROGRAM

Name Grade

Print your full name clearly in the space above and indicate your grade.

Please list your top three (3) choices for Winterim participation in the spaces below. List the program names in order of preference and be sure to choose only those programs that are open to your grade level. Choose programs that you and your families agree are appropriate and financially feasible.

You and your parent/guardian must also sign in the spaces below for your selections to be considered.

Return this form to your advisor by Friday, November 13, 2009. Your advisor will sign the form and turn it in for you.

CHOICES

First	
Second	
Third	

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Advisor Signature _____ Date _____

If you have questions, please contact Juan Flores at (505) 898-6388, ext. 110 or Dolores Landavazo at ext. 221. Thank you.