



Mercy
Education Resource
Center | Maximizing Potential

Our Instruction Department Proudly Presents
STRATEGIES FOR SCHOOL SUCCESS
2011-2012

*** SCORE HIGH WITH STUDY SKILLS**

In just three hours incoming 5th thru 8th grade students discover how to "learn more in less time". The workshop begins with each student learning their specific study style and how to optimize this style by utilizing our time management strategies, study methods, test-taking tips and much more! Students complete practice exercises and receive a valuable study skills booklet for future reference. November 5, 2011 & April 21, 2012

*** WONDERFUL WRITERS WORKSHOP**

Your 5th thru 7th grader can learn how to "write their way to an A" by attending one of these three hour workshops: the fundamental elements of essay writing or taking the writer from thesis statement to completed essay. *October 15 and 22, 2011 & March 3 and 10, 2012*

*** HURRAY FOR HIGH SCHOOL**

Students score higher when they understand the skills and strategies needed to take the Catholic High School placement exam. We offer a six hour workshop over 2 days that provides an overview of the test, question-answering tips, test-taking techniques, practice exercises, and a complete practice test. December 3 and 10, 2011 & January 7 and 14, 2012

*** TIP-TOP TUTORING**

Schedule one of our many qualified tutors to assist your child in having a successful school year. Tutoring includes diagnostic assessment, monthly progress reports, and ongoing communication with parents. Workshops are also offered in one-on-one sessions. *Offered year-round*

CALL 737-6026 for more information today!!!!
Mercy Education Resource Center



Dear Parent,

Thank you for your interest in our workshop. Our registration policy is based on the date that all forms along with full payment are received. This allows us to inform clients at the earliest possible date of their acceptance into our workshop. Due to our desire to offer an optimum learning environment by limiting the number of students in each class, the classes will be filled according to date paid. You will receive confirmation of either your participation in our workshop or our regrets that the class has been filled. Once a student has been enrolled in a class the fee cannot be refunded. If you have any questions please call us at 737-6026.

Sincerely yours,

Pat Friesen
Instruction Coordinator



**Workshop - Registration Form
(Please Print)**

Name of Program: _____

Date/Time of Program: _____

Student Name: _____

School: _____ Grade: _____

Parent Name: _____

Address: _____
(number, street, apt. number)

(city, state, zip code)

Phone: _____ Cell Phone: _____

Payment Options

Cash Check Credit Card - Type: _____

Credit card #: _____

Exp. date: _____ Security #: _____

Name on card: _____

Amount to be charged: _____

(please remember that the fee is not refundable once the student is enrolled in the class)



WORKSHOP - Emergency Information

Name of Child _____

Address _____ City/Zip _____

Home Phone _____ School _____

Father's Name _____ Cell Phone _____

Employer _____ Wk Phone _____

Mother's Name _____ Cell Phone _____

Employer _____ Wk Phone _____

If my child is ill or has an emergency and I cannot be reached,
please call and release my child to:

Name _____ Day Phone _____

or

Name _____ Day Phone _____

Physician's Name _____

Medical Coverage by _____ ID # _____

Address _____ Physician's Phone # _____

Hospital of preference _____

Please check ONE box

1. In the event of an emergency, when a parent or guardian is unavailable, I authorize Mercy Ed. personnel to make arrangements for my child to receive medical/hospital care, including necessary transportation, in accordance with their best judgment. I authorize the physician named above to undertake such care and treatment as is considered necessary. In the event said physician is unavailable, I authorize such care and treatment to be performed by a licensed physician or surgeon. I agree to pay all costs incurred as a result of the foregoing.
2. I do not choose the above statement and desire the following action in the event of an emergency: _____

Parent/Guardian's Signature

Date: