

County _____ District No. _____ School _____

**Oklahoma State Department of Education
2500 North Lincoln Boulevard
Oklahoma City, Oklahoma 73105-4599**

SUMMER SCHOOL ACCREDITATION APPLICATION

Submit two notarized copies of this application to the Accreditation Division, State Department of Education, 2500 North Lincoln Boulevard, Oklahoma City, OK 73105-4599. The State Department of Education must receive this application prior to or **during the first week of summer school**. Copies of this application are to be kept at the office of the superintendent and the administrative office for the summer school.

Accreditation regulations for summer schools are found on page 193 of the STANDARDS FOR ACCREDITATION OF OKLAHOMA SCHOOLS, 2010. Driver's Education regulations are found on pages 152-154 of the same document.

_____	_____
Name of this school site	Address
()	
_____	_____
School telephone number	City State Zip code

CERTIFICATE OF ACCURACY

1. I hereby certify that the information contained in the following report is complete and correct.

_____	_____
Notary	Superintendent
_____	_____
Date My Commission Expires	Principal of the Summer School

2. Date the **first** summer session begins? _____ Date **first** session ends? _____
Date **second** summer session begins? _____ Date **second** session ends? _____
3. Number of pupils participating in the **first** session of summer school? _____
Anticipated number of pupils in the **second** session of summer school? _____
4. Do the courses meet the requirements of a Carnegie Unit for one unit of credit? YES _____ NO _____
Do the courses meet the requirements of a Carnegie Unit for ½ unit of credit? YES _____ NO _____
5. Has this school district given their written consent to allow a cooperative regional summer school at the Career and Technology Center that provides authorized academic courses? YES _____ NO _____
NA _____

SUMMER SCHOOL PROGRAM OF STUDIES

Please indicate by curriculum area a nonduplicated listing of **all courses** that are offered during the entire summer school program. Also indicate whether the course is granting one unit or one-half unit of credit.

Courses Titles	Number of units	Courses Titles	Number of units
BUSINESS		MATHEMATICS	
DRIVER'S EDUCATION		SCIENCE	
FOREIGN LANGUAGE		SOCIAL STUDIES	
LANGUAGE ARTS		OTHER SUBJECTS	

SUMMER SCHOOL CLASS SCHEDULE

List the names of **all certified teachers** teaching at this summer school and the subject that they teach. Use the name as it appears on the teaching certificate. Indicate the six-digit teacher number for each teacher.

Show the total amount of time for each class period in minutes, include breaks. Also indicate the number of pupils enrolled in each subject.

TEACHER NAME AND TEACHER NUMBER	FIRST PERIOD Subject Taught	Number of Minutes	Number of pupils	SECOND PERIOD Subject Taught	Number of Minutes	Number of pupils
TEACHER NAME AND TEACHER NUMBER	THIRD PERIOD Subject Taught	Number of Minutes	Number of pupils	FOURTH PERIOD Subject Taught	Number of Minutes	Number of pupils