

**ILLINOIS STATE BOARD OF EDUCATION
FY 2010 SUMMER BRIDGES
SIX-DAY COUNT ENROLLMENT FORM**

INSTRUCTIONS: Complete this form and submit by fax on the **6th day** of your Summer Bridges program. If you have classes where grades are combined, please report attendance on separate sheet with explanation. **FAX FORM TO:** Attention of **Sharryon Dunbar**, Illinois State Board of Education, **217-785-9031**.

Minimum and maximum class sizes must be maintained. Class size is limited to a minimum of 12 and a maximum of 15 students in grades 1-6. A seven (7) student minimum and ten (10) student maximum are required in pre-kindergarten and kindergarten. If a class has less than the minimum number of students, classes can be combined to achieve the maximum number. In extenuating cases, up to two additional students may be included. The administrator and classroom teacher must mutually agree to this class limit exception. **Teachers must be dismissed if not enough students are enrolled as determined after a six-day enrollment count.**

DISTRICT NAME AND NUMBER			CONTACT PERSON					TELEPHONE (Include Area Code)				
			PK	K	1	2	3	4	5	6	Total	
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade										
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges										

**ILLINOIS STATE BOARD OF EDUCATION
FY 2010 SUMMER BRIDGES
SIX-DAY COUNT ENROLLMENT FORM**

INSTRUCTIONS: Complete this form and submit by fax on the **6th day** of your Summer Bridges program. If you have classes where grades are combined, please report attendance on separate sheet with explanation. **FAX FORM TO:** Attention of **Sharryon Dunbar**, Illinois State Board of Education, **217-785-9031**.

Minimum and maximum class sizes must be maintained. Class size is limited to a minimum of 12 and a maximum of 15 students in grades 1-6. A seven (7) student minimum and ten (10) student maximum are required in pre-kindergarten and kindergarten. If a class has less than the minimum number of students, classes can be combined to achieve the maximum number. In extenuating cases, up to two additional students may be included. The administrator and classroom teacher must mutually agree to this class limit exception. **Teachers must be dismissed if not enough students are enrolled as determined after a six-day enrollment count.**

DISTRICT NAME AND NUMBER			CONTACT PERSON					TELEPHONE (Include Area Code)				GRADES									
												PK	K	1	2	3	4	5	6	Total	
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade																			
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges																			
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade																			
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges																			
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade																			
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges																			
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade																			
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges																			
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade																			
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges																			
* SITE NAME AND ADDRESS	NAME OF ADMINISTRATOR/COORDINATOR	Number of Teachers by Grade																			
	TELEPHONE NUMBER	Number of Students Enrolled in Summer Bridges																			
											TOTAL →										