



# PATERSON PUBLIC SCHOOLS



NORMAN S. WEIR  
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Grace Giglio  
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Eileen F. Shafer, M.Ed.  
Acting State District Superintendent

## NORMAN S. WEIR (PARENT/GUARDIAN SELECTION) #PPS SATURDAY ACADEMY REGISTRATION FORM

Grades K-8  
January 2018 through April 2018  
8:00 a.m. – 11:30 a.m.

Please complete this form and return to your child's school by **Wednesday, November 15, 2017**, only if your child will be participating in the program.

Dear Parent/Guardian, please select only one (1) school location below:

- |  |  |  |  |   |
|--|--|--|--|---|
| <input type="checkbox"/> School No. 4/Napier | <input type="checkbox"/> School No. 9  | <input type="checkbox"/> School No. 18 | <input type="checkbox"/> School No. 21 | <input type="checkbox"/> School No. 24      |
| <input type="checkbox"/> School No. 25       | <input type="checkbox"/> School No. 26 | <input type="checkbox"/> School No. 27 | <input type="checkbox"/> School No. 29 | <input type="checkbox"/> Alexander Hamilton |

|                                      |  |                 |                    |
|--------------------------------------|--|-----------------|--------------------|
| Child's Name: _____                  |  | Grade: _____    | Home School: _____ |
| Emergency Contact Information        | Name: _____  |                 |                    |
|                                      | Relationship to Student: _____   |                 |                    |
|                                      | Phone/Cell Number: ( ) _____   |                 |                    |
|                                      | Alternative Phone/Cell Number: ( ) _____   |                 |                    |
| Brother/Sister's Name: _____         |  | Grade(s): _____ |                    |
| Medical Information                  | <input type="checkbox"/> No Medical Problems <input type="checkbox"/> Diabetes <input type="checkbox"/> Asthma<br><input type="checkbox"/> Allergies: _____<br>Other _____ |                 |                    |
| Place an (X) on the appropriate box: |  |                 |                    |

Please indicate only one (1):

I understand that the program will occur only on Saturdays (see Parent/Guardian letter) and my child must be **picked-up** at 11:30 a.m. promptly. Breakfast will be served at 8:00 a.m. Lunch will not be served.

Person responsible for picking up my child: \_\_\_\_\_ Phone/Cell Number: ( ) \_\_\_\_\_

Alternate person responsible for picking up my child: \_\_\_\_\_

Alternative Phone/Cell Number: ( ) \_\_\_\_\_

My child will be **walking home** from school at 11:30 a.m.

Yes, I give my child, \_\_\_\_\_, permission to participate in the #PPS Saturday Academy.

Parent/Guardian's Name (print) \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return to your child's school by **Wednesday, November 15, 2017**.

To be completed by School Administrator(s)/District:

Student ID #: \_\_\_\_\_ School: \_\_\_\_\_

EL: \_\_\_\_\_ SPED: \_\_\_\_\_ 504: \_\_\_\_\_

Saturday Classroom Assigned: \_\_\_\_\_ Grade: \_\_\_\_\_

Preparing All Children for College and Career  
Together We Can



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## NORMAN S. WEIR (PADRE/GUARDIÁN SELECCIÓN) FORMULARIO DEL MATRICULACIÓN PARA EL "#PPS SATURDAY ACADEMY"

Grados K-8  
enero 2018 hasta abril 2018  
8:00 a.m. – 11:30 a.m.

Favor de completar este formulario y devuélvalo a la maestra/o de su hijo/a el miércoles, 15 de noviembre del 2017, solamente si su hijo/a va a participar en el programa.

Querido Padre/Guardián por favor seleccione uno (1):

- |  |  |  |  |   |
|--|--|--|--|---|
| <input type="checkbox"/> Escuela Núm. 4/Napier | <input type="checkbox"/> Escuela Núm. 9  | <input type="checkbox"/> Escuela Núm. 18 | <input type="checkbox"/> Escuela Núm. 21 | <input type="checkbox"/> Escuela Núm. 24    |
| <input type="checkbox"/> Escuela Núm. 25       | <input type="checkbox"/> Escuela Núm. 26 | <input type="checkbox"/> Escuela Núm. 27 | <input type="checkbox"/> Escuela Núm. 29 | <input type="checkbox"/> Alexander Hamilton |

|   |   |              |   |
|---|---|--------------|---|
| Nombre del Estudiante: _____                              |   | Grado: _____ | Escuela: _____  |
| Información del Contacto de Emergencia                    | Nombre: _____                                   |              |   |
|   | Relación al Estudiante: _____                   |              |   |
|   | Número del Teléfono/Celular: ( ) _____          |              |   |
|   | Número Alterno de Teléfono/Celular: ( ) _____   |              |   |
| Información Medica<br>Ponga una (X) en la caja apropiada: | <input type="checkbox"/> Ningún problema médico |              | <input type="checkbox"/> Diabetes (azúcar en la sangre) |
|   | <input type="checkbox"/> Alergias: _____        |              | <input type="checkbox"/> Asma                           |
| Algún otro problema _____                                 |   |              |   |

Por favor indique solamente uno (1):

Yo entiendo que el programa se ofrecerá solamente los Sábados (vea la carta de Padre/Guardián) y que mi hijo/a debe ser **recogido/a** a las 11:30 a.m. en punto. Desayuno será proveído a las 8:00 a.m. Almuerzo no será proveído.

Persona responsable de recoger a mi hijo/a: \_\_\_\_\_ Número de Teléfono/Celular: ( ) \_\_\_\_\_

Persona alterna responsable de recoger a mi hijo/a: \_\_\_\_\_

Número alterno de Teléfono/Celular: ( ) \_\_\_\_\_

Mi hijo/a se irá **caminando a la casa** después del programa a las 11:30 a.m.

Sí, Yo le doy permiso a mi hijo/a, \_\_\_\_\_ para que participe en el programa de "#PPS Saturday Academy".

Nombre del Padre/Guardián (letra de molde) \_\_\_\_\_

Firma del Padre/Guardián \_\_\_\_\_

Fecha \_\_\_\_\_

Por favor devuelva este formulario a la escuela de su hijo/a no más tarde de miercoles, 15 de noviembre del 2017.

Para ser completado por el administrador(es) Escolar/Distrito:

Número de Identificación del Estudiante: \_\_\_\_\_ Escuela: \_\_\_\_\_

EL: \_\_\_\_\_ SPED: \_\_\_\_\_ 504: \_\_\_\_\_

Salón Asignado los Sábados: \_\_\_\_\_ Grado: \_\_\_\_\_



Marguerite Sullivan  
Director of Federal Programs  
E-mail: [msullivan@paterson.k12.nj.us](mailto:msullivan@paterson.k12.nj.us)

Eileen F. Shafer, M.Ed.  
Acting State District Superintendent

## NORMAN S. WEIR (PARENT/GUARDIAN SELECTION)

### #PPS SATURDAY ACADEMY PROGRAM

October 26, 2017

Dear Parents/Guardians:

Paterson Public Schools is offering the #PPS Saturday Academy program for students enrolled in Grades K-8. The program location is specific to each school. **For students who attend Norman S. Weir, the program will be held at various schools. The Parent/Guardian must select the school which their child will be attending.** The #PPS Saturday Academy program is scheduled to begin on January 6, 2018 - April 28, 2018 from 8:00 a.m. to 11:30 a.m. Breakfast will be served at 8:00 a.m. Lunch **will not** be served. This program is designed to provide students with skills and strategies in English Language Arts, Mathematics, STEAM, Character Education, and Bilingual.

The #PPS Saturday Academy program is scheduled as follows:

| January 2018 |    |    |    |    |    |               |
|--------------|----|----|----|----|----|---------------|
| S            | M  | T  | W  | T  | F  | S             |
|              | 1  | 2  | 3  | 4  | 5  | 6             |
| 7            | 8  | 9  | 10 | 11 | 12 | <del>13</del> |
| 14           | 15 | 16 | 17 | 18 | 19 | 20            |
| 21           | 22 | 23 | 24 | 25 | 26 | 27            |
| 28           | 29 | 30 | 31 |    |    |               |

| February 2018 |    |    |    |    |    |               |
|---------------|----|----|----|----|----|---------------|
| S             | M  | T  | W  | T  | F  | S             |
|               |    |    |    | 1  | 2  | 3             |
| 4             | 5  | 6  | 7  | 8  | 9  | 10            |
| 11            | 12 | 13 | 14 | 15 | 16 | <del>17</del> |
| 18            | 19 | 20 | 21 | 22 | 23 | 24            |
| 25            | 26 | 27 | 28 |    |    |               |

| March 2018 |    |    |    |    |    |               |
|------------|----|----|----|----|----|---------------|
| S          | M  | T  | W  | T  | F  | S             |
|            |    |    |    | 1  | 2  | 3             |
| 4          | 5  | 6  | 7  | 8  | 9  | 10            |
| 11         | 12 | 13 | 14 | 15 | 16 | 17            |
| 18         | 19 | 20 | 21 | 22 | 23 | 24            |
| 25         | 26 | 27 | 28 | 29 | 30 | <del>31</del> |

| April 2018 |    |    |    |    |    |              |
|------------|----|----|----|----|----|--------------|
| S          | M  | T  | W  | T  | F  | S            |
| 1          | 2  | 3  | 4  | 5  | 6  | <del>7</del> |
| 8          | 9  | 10 | 11 | 12 | 13 | 14           |
| 15         | 16 | 17 | 18 | 19 | 20 | 21           |
| 22         | 23 | 24 | 25 | 26 | 27 | 28           |
| 29         | 30 |    |    |    |    |              |

In order for your child/children to be enrolled in this program, you must complete a registration form and return it to your child's teacher by Wednesday, November 15, 2017. It is important all requested information is completed. **Please note: Transportation will not be provided.**

Thank you for your continued involvement and support of your child's education. If you wish to learn more about #PPS Saturday Academy program, please contact your child's principal and visit our district's website.

Sincerely,

Marguerite Sullivan  
Director of Federal Programs

Attachment

pc: Eileen F. Shafer  
Susana Peron  
Cheryl Coy  
Cicely Warren  
Sandra Diodonet  
Eric Crespo  
Joanna Tsimpedes



Marguerite Sullivan  
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Eileen F. Shafer, M.Ed.  
Acting State District Superintendent

## NORMAN S. WEIR (PADRE/GUARDIÁN SELECCIÓN) PROGRAMA "#PPS SATURDAY ACADEMY"

26 de octubre del 2017

Estimados Padres/Guardianes:

Las Escuelas Públicas de Paterson están ofreciendo el programa "#PPS Saturday Academy" para los estudiantes matriculados en los grados K-8. El lugar del programa es específico para cada escuela. **Para los estudiantes que asisten a la Escuela Norman S. Weir, el programa será ofrecido en varias escuelas. El Padre/Guardián debe de seleccionar la escuela a la cual su hijo/a asistirá.** El programa "#PPS Saturday Academy" comenzará el 6 de enero del 2018 hasta abril 28 del 2018 desde las 8:00 a.m. hasta 11:30 a.m. Desayuno será proveído a las 8:00 a.m. Almuerzo **no será** proveído. El programa está diseñado para proveer a los estudiantes con destrezas y estrategias en la Lengua Literatura Inglesa, Matemáticas, STEAM, Educación de Carácter y Bilingüe.

El programa "#PPS Saturday Academy" se llevará a cabo cómo sigue:

| enero 2018 |    |    |    |    |    |               |
|------------|----|----|----|----|----|---------------|
| D          | L  | M  | M  | J  | V  | S             |
|            | 1  | 2  | 3  | 4  | 5  | 6             |
| 7          | 8  | 9  | 10 | 11 | 12 | <del>13</del> |
| 14         | 15 | 16 | 17 | 18 | 19 | 20            |
| 21         | 22 | 23 | 24 | 25 | 26 | 27            |
| 28         | 29 | 30 | 31 |    |    |               |

| febrero 2018 |    |    |    |    |    |               |
|--------------|----|----|----|----|----|---------------|
| D            | L  | M  | M  | J  | V  | S             |
|              |    |    |    | 1  | 2  | 3             |
| 4            | 5  | 6  | 7  | 8  | 9  | 10            |
| 11           | 12 | 13 | 14 | 15 | 16 | <del>17</del> |
| 18           | 19 | 20 | 21 | 22 | 23 | 24            |
| 25           | 26 | 27 | 28 |    |    |               |

| marzo 2018 |    |    |    |    |    |               |
|------------|----|----|----|----|----|---------------|
| D          | L  | M  | M  | J  | V  | S             |
|            |    |    |    | 1  | 2  | 3             |
| 4          | 5  | 6  | 7  | 8  | 9  | 10            |
| 11         | 12 | 13 | 14 | 15 | 16 | 17            |
| 18         | 19 | 20 | 21 | 22 | 23 | 24            |
| 25         | 26 | 27 | 28 | 29 | 30 | <del>31</del> |

| abril 2018 |    |    |    |    |    |              |
|------------|----|----|----|----|----|--------------|
| D          | L  | M  | M  | J  | V  | S            |
| 1          | 2  | 3  | 4  | 5  | 6  | <del>7</del> |
| 8          | 9  | 10 | 11 | 12 | 13 | 14           |
| 15         | 16 | 17 | 18 | 19 | 20 | 21           |
| 22         | 23 | 24 | 25 | 26 | 27 | 28           |
| 29         | 30 |    |    |    |    |              |

Para que su hijo/a esté inscrito en este programa, usted debe completar un formulario de matriculación y devuélvalo a la maestra/o de su hijo/a no más tardar del miércoles, 15 de noviembre del 2017. Es importante que toda la información requerida esté completa. Tenga en cuenta **que no se proveerá transporte.**

Gracias por su continua participación y apoyo en la educación de su hijo/a. Si desea obtener más información sobre "#PPS Saturday Academy", por favor comuníquese con el director/principal o visite nuestra página web.

Atentamente,

Marguerite Sullivan  
Directora de Programa Federales

Adjunto

pc: Eileen F. Shafer  
Susana Peron  
Cheryl Coy  
Cicely Warren  
Sandra Diodonet  
Eric Crespo  
Joanna Tsimpedes