



Miami-Dade County Public Schools

giving our students the world

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December 14th, 2023

Dear Parent(s)/Guardian(s),

This is to inform you that South Dade Senior High School is offering afterschool tutoring for English Learner (EL) students. This program has been initiated to provide assistance in Reading, Writing, and Math. Tutorials in the content areas are to provide, in a language other than English, selected basic skills and concepts which are generally offered in English. Such reinforcement in the home language and with the use of second language strategies empowers the academic achievement of your child. Tutoring will begin January 8th, 2024. Classes will be held as follows:

	Reading	Writing	Math
DATE:	Mon. and Wed.	Mon. and Wed.	Mon., Wed. & Fri.
TIME:	2:30 – 4:00 PM	2:30 – 4:00 PM	2:30 – 4:00 PM
Room #:	2321	2320	2318

If you have any questions or need further information regarding your child's tutoring program, please contact Migdalia Canova Anckle, ESOL Department Chair at 305-247-4222.

Sincerely,

Jay C. De Armas
Principal

Please sign and return this form (front and back) to Mrs. Canova Anckle in room 2321.

_____ Yes, I want my child _____ to attend the program.

_____ No, I do not want my child _____ to attend the program.

Parent/Guardian Signature

Date



MIAMI-DADE COUNTY PUBLIC SCHOOLS

**School-sponsored Activities, Events, and
Supplemental Programs
Parent/Legal Guardian Permission Form**

**Required for participation in any and all school-sponsored
activities, events, or supplemental programs**

Student Name: _____

Telephone: _____

Activity/Event Name: _____

Description or nature of the activity or event:

Date the activity or event will begin: _____

Date the activity or event will end: _____

Location of the activity or event: _____

Name(s) of activity or event sponsor(s): _____

Types of guests that may attend the activity or event: _____

Scheduled Days of the Week: (Circle all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday

Scheduled Time: From _____ To _____

I give my child permission to participate in the above-named or attached activity,
event, or supplemental program during the dates and times listed above for the 2023-
24 school year.

Name of Parent: _____ Telephone: _____

Signature of Parent: _____ Date: _____

Dates and times of an activity or event may vary throughout the school year. The
activity/event sponsor will contact parents to notify of any such change.

EMERGENCY CONTACT

Name: _____ Telephone: _____

Relationship to Student: _____

***This form must be signed, submitted and retained by the activity or event sponsor prior to student
participation***