Lower School Homework Clinic

The Lower School is pleased to continue its successful program called Homework Clinic. This program is geared to help students with organization and study skills, as well as assistance with specific homework assignments. Students will be taught how to set priorities and how to budget time for long-range assignments.

Lower School Homework Clinic is not intended as a substitute of special tutoring, but can be used as an adjunct to it. Homework Clinic is also intended for students whose parents need to monitor their homework because of learning needs, but whose work schedules prevent their availability.

This program is open to students in fourth and fifth grade. It is available Mondays, Tuesdays, Wednesdays, and Thursdays. The hours are from 3:15 p.m. to 5:15 p.m. with the exception of Tuesdays which is 2:15 p.m. to 4:15 p.m. We will provide a snack as well as a ten minute break. Students should plan to stay until 5:15 p.m. (on Tuesdays 4:15 p.m.) and should bring long-range assignments to work on when they have completed the night's homework. The fee each day is $30.00 and students are encouraged to attend at least two days per week. This will enable Homework Clinic teachers to monitor progress effectively and provide consistent help for planning assignments. We encourage parents to sign up in advance for a full quarter session, although students will be considered for Homework Clinic on a monthly basis as well. Charges for sessions will be billed to you at the end of the month directly from the Business Office at Sayre. Students must sign up at the beginning of each month or quarter in the Lower School to reserve a space.

If you are interested in having your child attend Homework Clinic, please fill out the enrollment form below or email Mrs. O'Rourke at morourke@sayreschool.org.

SAYRE SCHOOL

Lower School Homework Clinic Program

Enrollment Form

Student Name _____ Student Grade _____

Parent Name _____

Telephone Number (Home) _____

Telephone Number (Work) _____

Please Circle Day(s) M T W Th

Parent Signature _____

The Business Office will bill you at the end of each month. Please return this form to the Lower School Office. Please be sure and circle the days your child will be attending.