

**Estimated Enrollment**  
**Remedial Summer School Program**  
**Summer 2003**

Indicate the number of eligible pupils expected to be enrolled in the Summer 2003 Remedial Program:

Elementary (K-7)	=	_____
Secondary (8-12)	=	_____
Total	=	_____

\*Note: This program reimburses school divisions on the basis of a headcount of all eligible students. Each student served in the 2003 remedial summer school program should only be counted one time.

I hereby certify that the above information is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Division Superintendent

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Division/Division Code

\_\_\_\_\_  
Name of Individual Completing Form

\_\_\_\_\_  
Telephone Number

**Please fax the completed form no later than August 15, 2003, to:**

Mrs. Leigh H. Williams  
Senior Budget Analyst  
Virginia Department of Education  
Fax: (804) 225-2300