GAN DEGUTO ALLIANCE FOR DRUG FREE YOUTH STUDY BUDDY PROGRAM - SPRING 2009

STUDY BUDDY, sponsored by San Dieguito Alliance, the Encinitas Union School District, the Cardiff School District and their PTA/PTOs, is a community service opportunity to tutor and friendship an elementary school student for one hour after school each week. Due to the early dismissal times of the Encinitas schools, the only STUDY BUDDY programs available to San Dieguito Academy students will be at Ada Harris and Capri (map on back).

IF YOU DO NOT HAVE A FOURTH PERIOD CLASS, YOU CAN BE A STUDY BUDDY AT OTHER ENCINITAS SCHOOLS WHOSE PROGRAMS BEGIN AT 2:50. PLEASE INDICATE THAT ON APPLICATION.

ADA HARRIS ELEMENTARY (7 sessions)

Mandatory orientation is March 2

Program begins March 9

NO programs March 16 and April 6

Program ends May 4

CAPRI ELEMENTARY (6 sessions)

Mandatory orientation is March 11

Program begins March 18

NO programs April 1 and 8

Program ends May 6

You must be committed to

- T attend ALL7/6 sessions
- **T** attend the mandatory orientation (You will be notified by postcard as to school assignment, and date and time of orientation.)
- T model an alcohol, tobacco and drug free lifestyle

STUDY BUDDY SCHOOLS AND THEIR DIRECTORS:

Ada Harris Elementary 1508 Windsor, Cardiff Val Golden (760) 942-8689 Capri Elementary
941 Capri Road, Encinitas
Pam Davis
(760) 634-5513

APPLICATION DEADLINE: FRIDAY, FEBRUARY 20, 2009

<u>DROP</u> at your School Counseling Office, or <u>FAX</u> to San Dieguito Alliance, (760) 943-1165

Questions: Diane Grace, STUDY BUDDY Program Director, (760) 943-1164 or SDAlliance4@aol.com

SAN DIEGUITO ALLIANCE FOR DRUG FREE YOUTH CARDIFF/ENCINITAS STUDY BUDDY PROGRAMS - SPRING 2009

<u>Check any</u> of the STUDY BUDDY Programs and <u>any of the days</u> in which you are interested.

' <u>Ada Harris</u> Monday	-	<u>Capri</u> Wednesday		am interested in being a STUDY BUDDY				
3:20 - 4:20		3:30 - 4:30			at another school. (A STUDY BUDDY director will call you.)			
NAME (Please print in <u>dark ink</u> ONLY)		HOME F	HOME PHONE		CELL/ALTERNATE PHONE			
ADDRESS (including <u>CITY AND ZIP CODE</u>)						EMAIL ADDRESS		
HIGH SCHOOL	CL	ASS 0F 09, 10	, 11, 12	DATE OF	BIRTH	MALE/FEI	—— MALE	
Have you participated as a TEEN in <u>S</u>	an Dieguit	to Alliance's STI	UDY BUDD	Y Program? \	(es No	_ School		
Do you prefer your Buddy to be	Воу	Girl		Grades 2,3_		Grades 4,5,6_		
Do you speak a second language?	Yes	No	lf so, wh	If so, which one				
WITHOUT THE 3 REQUEST REGIONAL PROBLEM THE BY SIGNING, I am committed to produced an alcohol, tobacco a pexemplify a positive role model and produced produced produced by attending the mandatory original produced produc	and other odel for chi ocademic e	drug free lifesty ildren scholarship	yle)U.	
						(Student sig	nature)	
By signing, I recognize my teen's part	icipation ir	1 the program a	nd their pl	edge to be alc	ohol, tobac	co and other dru	ug free.	
				_(Parent signa	ature)		(Phone)	
By signing, I recommend this student	for the S	TUDY BUDDY P	rogram.					
					_(Counseld	or or Teacher sig	nature)	

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