



Dutchtown High School  
149 Mitchell Road  
Hampton, GA 30228  
(770) 515-7510  
[www.henry.k12.ga.us/dh](http://www.henry.k12.ga.us/dh)

Dr. Terry Oatts,  
*Principal*

Ingrid Forbes, Ed. D.  
Nicole Shaw  
Corey Stephens

January 20, 2014

Dear Parents:

High school is a new and intimidating experience for freshmen. With this in mind, Henry County Schools developed the Second Chance Program. This program allows ninth grade students to recover credit in one core area in which they earned a grade of 55 to 69. The first semester grade will be replaced with a grade up to a 79 after successfully completing our credit recovery course.

If your child failed English I, Math I, and/or Biology first semester and you are able to provide transportation from January 27 – April 3 on Mondays and Wednesdays, please complete the registration form attached to this letter. Please read the brochure carefully. **Please be aware that the attendance and discipline policies are strictly enforced: tardiness, poor attendance, and discipline problems will result in immediate dismissal from the program.**

If you would like your child to attend, please complete the registration form on the back of this letter and return it to Ms. Kessinger in the Main Office by **Wednesday, January 22<sup>nd</sup>**. **Classes will begin on Monday, January 27<sup>th</sup>. Space is limited and classes will be filled on a “first come” basis.** Additionally, a Second Chance brochure is enclosed with specific information regarding the program.

This is an excellent opportunity for students to ensure they complete core academic requirements for their freshmen year. Please contact me if you have any questions or concerns.

Sincerely,

*Kimberly Kessinger*  
*Graduation Coach/9<sup>th</sup> Grade Transition Coordinator*  
*Henry County High School*  
[kimberly.kessinger@henry.k12.ga.us](mailto:kimberly.kessinger@henry.k12.ga.us)  
*(770) 515-7510 ext. 119*

## Second Chance Registration Form

Course Title	1 <sup>st</sup> Semester Teacher	1 <sup>st</sup> Semester Grade

**PLEASE PRINT**

Student Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Parent/Guardian Signature Date

My signature indicates my understanding and agreement with the guidelines of the Second Chance program.

### Important Registration Information

**\*\*Complete this registration form and returned it to Ms. Kessinger (Graduation Coach) in the main office by Wednesday, January 22, 2014.\*\***

### Registration Confirmation

-----  
\_\_\_\_\_  
Student has been enrolled in Second Chance 2014.

\_\_\_\_\_  
Course Teacher Room

Class begins at promptly at 3:30 on Monday, January 27, 2014.