



Be seen. Be heard. Be empowered.

Summer 2023

Minot State University Early Literacy Camp

Parent Name: _____

Child Name: _____

Address: _____

Email: _____

Work Phone: _____

Home Phone: _____

Emergency Number: _____

(In case child becomes ill and we need to have them picked up early)

School attended & current grade: _____

Reading Level as determined by the school during spring 2023: _____

Indicate which Early Literacy Camp sessions you would be able to attend

1. T and Th from 9-11 _____
2. T and Th from 1-3 _____
3. M and W from 9-11 _____
4. M and W from 1-3 _____

Initial assessment (informal reading inventory, phonemic awareness assessment, and hearing screening) will be conducted the week before camp and will be scheduled with you after acceptance.

Comments: Since acceptance into Early Literacy Camp is based on need, you should provide information about the child's reading level and difficulties. Below, please describe the reading problem and provide any additional information about your child that would be helpful, such as comments from the teacher and a reading level: