

Maritime Academy Charter School * 21st CCLC Program
2275 Bridge Street * Building 107
Philadelphia, Pennsylvania 19137
Phone: 215 – 535 – 4555



21st Century Nita M. Lowey Community Learning Center Fall Offerings

October 2, 2020

Dear Parents/Guardians and Cadets:

Welcome back for this most interesting and challenging beginning to our CLC program year. We want everyone to know that our main focus is to provide safe programming for our cadets in the fall. As the school year continues, we will make adjustments to our schedule based on what is safe for cadets and staff. Our CLC program follows the same Health and Safety Plan as our school.

We will begin virtual CLC programming on Monday, October 5, 2020. Each virtual session will be on a Google Classroom specific to your cadet's grade level. Please see the schedule below:

	Monday	Tuesday	Wednesday	Thursday
Grades 1 and 2	Art	Maritime Pals	Art	Maritime Pals
Grades 3 and 4	Art	Book Club	Science	Math
Grades 5 and 6	Math	Art	Book Club	Science
Grades 7 and 8	Science	Math	Art	Book Club

Each session will begin with homework help. Program is available Mondays through Thursdays from 4:00 PM to 6:00 PM.

We will continue to evaluate our virtual programs and expand offerings if necessary. We will transition to in-person programming once we return to in-person learning.

Please complete the attached enrollment form and return it to school as soon as possible. If you have not responded to the survey on our website about participation in virtual CLC, please do so now and we can include you on the Google Classroom.

If you have any questions, please contact Mr. Hewitt at hewitt.s@maritimecharter.org or Ms. Fanega at fanega.j@maritimecharter.org.

Please return the Enrollment Form to Mr. Hewitt or Ms. Fanega.

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21st Century Nita M. Lowey Community Learning Center Enrollment Form

Please print all responses.

Today's Date: _____

Last Name: _____

First Name: _____

Current Grade: _____

Advisory: _____

Date of Birth: _____ / _____ / _____
Month Day Year

Please Circle: Male Female

First time in CLC: _____ Yes _____ No

ESL Level (if applicable): _____

Allergies (Food or Other):

Parent/Guardian Information:

Parent/Guardian Name: _____

Street Address: _____ APT#: _____

City: _____ State: _____ Zip: _____

Parent Contact Information:

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Participated in Summer CLC (July – August 2020) in-person or virtual ____ Yes ____ No

Please indicate on which days you need your child to participate virtually: (Please circle)

PM: Monday Tuesday Wednesday Thursday

All forms should be returned to Mr. Hewitt or Ms. Fanega.