As a student/participant of the Little Rock School District ACT Readiness Program I understand that:

I have the responsibility to work to the best of my ability in all of my classes.

I will attend classes, arrive on time daily, Tardiness 15 minutes or more will be considered an absence and have no more than 2 absences total for the session.

I will be dismissed if absences or tardiness (15 minutes or more) exceed 2.

I will conduct myself appropriately; follow all rules, regulations and policies of the LRSD student rights and responsibility and the ARP program.

I will respect the cleanliness of the host Facility, property of others, and rights of all students, faculty, staff, and others on the host campus.

I understand that failure to comply with the above will lead to dismissal from the program.

__________________________________________________________________________
Signature of Student __________________________ Date __________

As a Parent of a Participant in the Little Rock School District ACT Readiness Program:

I understand that it is my responsibility to make sure that my student follows LRSD policies, handbook and ACT Readiness rules and regulations.

I understand that if my Student fails to follow the LRSD ACT Readiness rules and regulations, he/she will be dismissed from the program.

We certify the above information is complete and correct. We have read and understand the above consent statement and agree to the program’s policies and procedures.

I understand that failure to comply with the above will lead to dismissal from the program.

I am the participant’s Parent/Guardian, and am fully competent to sign this agreement.

____________________________________________________________________________________
Signature of Parent or Legal Guardian __________________________ Date __________