

Lindbergh High School

Honors/Advanced Placement/College in the High School Agreement

Student Name (please print): _____
Student E-mail Address: _____
Parent Name (please print): _____
Parent E-mail Address: _____

Honors/AP/CIHS classes registered for the 2024 - 2025 school year:

- *I understand that Honors/AP/CIHS courses require more work outside of class and higher-level thinking.*
- *I have checked the homework requirements for all my classes, and I am certain that I can handle the workload, along with my other commitments (school, family, and extra-curricular).*
- *I understand the teaching schedule is created from student requests: therefore, I will not be allowed to drop any Honors, AP, or CIHS classes that I sign up to take.*
- *I understand I am responsible for the completion of summer assignments prior to the first day of school. If I don't complete these assignments, I will remain in the class and my grade will be impacted.*
- *I understand I must pay approximately \$98 (unless I am on free/reduced lunch) if I elect to take an AP exam and potentially earn college credit.*

Student Signature

Parent Signature

Your signature confirms your agreement to these statements.