

# Beacon Middle School

## Beacon Middle School AVID Student and Family Agreement

Please sign on the lines below and return to your AVID Teacher

AVID Student and Family Agreement

We have read and understand the AVID Course Syllabus and agree to support the efforts of this student in meeting the AVID Course Requirements outlined in this document.

AVID Student Name (print): \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Signed: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
(Student)

Student t-shirt size: YM YL AS AM AL AXL

AVID Parent/ Guardian Name(s) (print):  
\_\_\_\_\_

Telephone #s: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signed: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
(Parent/Guardian)

AVID Site Team consists of teachers, parents and students who meet every third month to discuss how to improve AVID or to share information about AVID.

\_\_\_\_ I am interested in attending Site Team Meetings and represent the parent group.

Failure to adhere to AVID Program Guidelines and Requirements, Classroom and Behavior Expectations, and School Policies and Procedures may result in being dropped from the AVID Program. AVID has procedures for probation and removal from the program. If you would like a copy of this information, please let me know and I will send it home with your student.

\_\_\_\_ Yes, I would like a copy of the probation and removal procedures.

Questions, comments, concerns or special information about this AVID student: