



## Individual Arts Assessment Pathway (IAAP) Enrollment Form

(Please submit this form to your school's guidance office.)

First & Last Name \_\_\_\_\_ Date \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_

I am enrolling into the Individual Arts Assessment Pathway (IAAP) program. I am aware that I will need to fulfill at least three complete years of coursework in the arts discipline of my choosing. I am also aware that there is a recommended sequence of arts courses and I will arrange to talk with my Guidance Counselor in order to attain an IAAP specialty diploma.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I am enrolling into the following arts discipline for my Individual Arts Assessment Pathway (IAAP) portfolio that is required by the Mount Vernon City School District and the New York State Department of Education to attain this specialty-based designation and diploma.

### CHOOSE ONE ONLY:

\_\_\_\_\_ Theater or Technical Theater

\_\_\_\_\_ Visual Art

\_\_\_\_\_ Dance

\_\_\_\_\_ Music (Piano)

\_\_\_\_\_ Music (Band)

\_\_\_\_\_ Music (Vocal)

\_\_\_\_\_ Music (String Orchestra)

I understand that I am required to maintain an arts portfolio in the discipline of my choosing listed above on an invited Schoology platform. I understand that I must meet all deadlines for this IAAP portfolio on the Schoology platform throughout my participation as a student in this Arts pathway.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I understand that if I wish to opt out of the Individual Arts Assessment Pathway (IAAP) at any time, this will require a notarized letter of communication written and signed by my parent/guardian addressed to the school principal.

\_\_\_\_\_ Yes \_\_\_\_\_ No

I want to share why I am passionate about Fine & Performing Arts. I am choosing to enroll in the Individual Arts Assessment Pathway (IAAP) because...

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Parent/Guardian's Name \_\_\_\_\_ Signature \_\_\_\_\_

Guidance Counselor's Name \_\_\_\_\_

Guidance Counselor's Signature \_\_\_\_\_ Counselor's Phone # \_\_\_\_\_