



POLK PRE-COLLEGIATE ACADEMY

STUDENT CONTRACT/PARTICIPATION AGREEMENT - Student

- 1. I understand that decisions about my education will not be made for me. My parents and I will work in collaboration with Polk Pre-Collegiate Academy personnel to design an educational program that addresses my strengths, weaknesses, interests and goals.
- 2. I understand that I will be expected to sign and abide by an agreement outlining my responsibility for all instructional materials, textbooks, and equipment issued to me.
- 3. I agree to attend school regularly and must adhere to the PPCA attendance policy. I understand that, in order to be successful in my academic work, I must be present for all scheduled classes. Excessive absences and/or tardies can result in possible dismissal.
- 4. I will exercise responsibility in meeting the academic requirements of my classes, in participating in extra-curricular and service activities and in representing the school in the community-at-large. I will take personal responsibility for my own choices, actions and obligations.
- 5. I will demonstrate respect for my teachers and my fellow students and for the processes of teaching and learning together as a community. I will respect school property and personal property.
- 6. I will demonstrate honesty and integrity. I will be truthful and trustworthy, displaying a personal sense of honorable and ethical behavior.
- 7. I will honor a tobacco and drug-free environment.
- 8. I understand that I must abide by the Polk County Public Schools Code of Student Conduct and all Polk Pre-Collegiate Academy policies and procedures. Dismissal from PPCA may result due to excessive discipline incidents or serious breaches of conduct.
- 9. I understand that I am subject to the laws, rules, regulations and policies of the PSCB Code of Conduct and the PPCA Board anytime I am being transported to or from school at public expense, when I am at-tending school and when I am on school property participating in a school-sponsored activity.
- 10. I understand that students in grades 9 and 10 are expected to remain on campus during the regular school hours.
- 11. I understand that I have the right to participate in athletic programs at a Polk County high school. I understand that the Pre-Collegiate academy Principal or Guidance Counselor will assist me with the necessary arrangements.
- 12. I understand that the Polk Pre-Collegiate Academy is a combined campus and that I may encounter students of a variety of ages and backgrounds while on the campus. I will conduct myself responsibly.
- 13. I understand that the Polk Pre-Collegiate Academy is a combined campus and that Polk Pre-Collegiate Academy, its officers, trustees, employees and agents are released from all liability, claims of demands for any damage loss, or injury to me, my property, or parent’s property in connection with my actions.

I have read and fully understand my responsibilities to ensure my academic success at PPCA.

Student Signature _____ Date _____

Parent Signature _____ Date _____