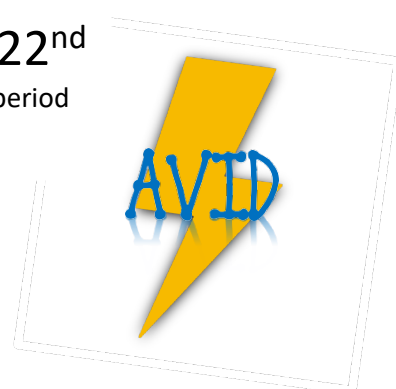


Return to Room 6-117 by April 22<sup>nd</sup>

Interviews will be conducted following the application period

# Intent to Apply

## AVID PROGRAM



Student Name: \_\_\_\_\_ Grade Level (Next Fall): \_\_\_\_\_

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

Email Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

### Program Description:

AVID is a college and career readiness program designed to help students develop the skills they need to be successful in school.

#### Student Goals:

1. Prepare for academic success in high school/ college preparatory courses.
2. Prepare for successful completion of college eligibility requirements.
3. Prepare for enrollment in four-year college/university after high school graduation.

#### Student Responsibilities:

1. Maintain enrollment in rigorous classes.
2. Maintain satisfactory citizenship and attendance in all classes.
3. Maintain the AVID binder with assignment/grade record sheets and daily notes from all classes.
4. Complete all classroom and homework assignments from all classes.
5. **DISCLAIMER:** Agree to be in AVID as an academic elective all year long.

### Commitment:

I understand my responsibilities and would like to be considered for acceptance into the AVID program.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Approval Signature

\_\_\_\_\_ **Parent/Guardian initials only to** indicate a review of this form and does **not** constitute automatic enrollment of son/daughter into the AVID program.

**This form must be completed in its entirety!**