Student Accountability Contract / Parent Contract of Support

SUBJECT: _______ ENGLISH 1-2 _______ TEACHER: _______ CARRINGTON _______

Student Accountability Contract
I have read the syllabus for CARRINGTON English 1-2. I will do my best to fulfill the requirements of the course and the expectations of my teacher. I understand that school-wide progress reports are issued every six weeks in my period 4 class and that I am to share this progress report with my parents. I understand that grades and individual assignment scores are posted online and that I must monitor my progress on a regular basis. Please refer to the PowerSchool online account registration form in your registration packet to sign up for this service.

Parent Contract of Support
I have read the syllabus for CARRINGTON English 1-2 and have discussed the course requirements and class expectations with my student. I pledge to support my student to fulfill these requirements and expectations. I understand that grades, assignment due dates, behavior issues, and homework are posted online and may be accessed at any time via PowerSchool and I understand that school-wide progress reports are issued every six weeks to my son/daughter. I will call the school counselor or 4th period teacher immediately if I do not receive the progress report. I understand that it is important for students to complete their work on time. **If I have questions or concerns my child cannot answer to my satisfaction, I will make the teacher my next point of contact.***

☐____ We have read Ms. Carrington’s syllabus that is posted on the school’s website

☐____ We are unable to read Ms. Carrington’s syllabus online and would like a printed copy

Parent (Print First Name, Last Name) _____________________________________________________________

Daytime Phone Number(s): ________________________________

Parent Signature ________________________________ Date ____________

Preferred E-mail address: _________________________________________________________________

Student (Print First Name, Last Name) _____________________________ Class Period _______

Student Signature ________________________________ Date ____________

The mission of University City High School is to educate students to become productive and responsible citizens, who realize their full potential through life long learning.