

Student and Family Commitment Agreement 2020-2021 School Year

Name of Student:	Graduation Year: <u>2023</u>
Districts. Seats are limited; enrollme the program, students and families mensure students remain on track for g	of the Kennewick, Pasco, and Richland School ent is by lottery. Due to the special nature of the sust commit to enrolling for a full year to graduation. Once a seat is accepted for the ed to transfer to another high school program
 Student Goals: Success in an integrated and rigorous academic program. Contributions to the learning of others and to the school community. Creation of meaningful relationships with community mentors. 	
completed and be an active par 2. I will take responsibility for my grades, citizenship, and attends 3. I will participate with classmat Student Agreement: I agree to accept enrollment into the I 2020-2021 school year the entire school year. I want to succe individual responsibility for my own sinfractions will be treated under the participate of the school year.	own learning and maintain satisfactory ance. tes to find the answers to my questions. Delta High School program for the and commit to attending for the duration of the and I understand that I must take
behavior contract and/or exited from t	the Delta program.
Student Signature	Date
I agree to support the efforts of my stunderstand the enrollment policies re	
Parent/Guardian Signature	 Date

Transfer Plan (only for students leaving Delta after the current school year)

If you plan transfer out of Delta at the end of the current school year, please complete the brief survey below so that our administrative staff can assist you with the process of withdrawal from Delta and enrollment in your future school:

*I plan to withdraw from Delta for the 2020-2021 school year and the remainder of high school. I will be enrolling in the following program(s) for the 2020-2021 school year: Return to home high school: __ District and home high school Home school Student Signature Date Parents: Please read and sign below, signifying your agreement with your student's academic plan moving into the future. **I agree to the above-listed transfer for my student. I understand my student may not be allowed to re-enroll at Delta once withdrawn. I further understand I must complete a withdrawal form at Delta in June (this ensures that records will be sent to your student's new school) and that I should schedule a meeting with my student's home high school counselor this spring to discuss course enrollment for next fall. Please call ahead to schedule a brief time to complete the form and ensure your student is cleared to enroll with their new school or program. Parent/Guardian Signature

Date