SUCCESS CONTRACT: 

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| AGREE(INITIAL) | SUCCESSFUL 8TH GRADE SCIENTIST LIST |
|  | I WILL HAVE A TABLE OF CONTENTS THAT WILL INCLUDE ALL INFORMATION, NOTES, LEQ’S, TESTS AND REFLECTIONS, QUIZZES AND LABS, AND VOCABULARY GRAPHIC ORGANIZERS IN THE ORDER WE DO THEM IN CLASS.  |
|  | I WILL TURN IN MY NOTEBOOK **ON TIME** UNLESS A DISCUSSED, DATE WAS APPROVED BEFORE THE DUE DATE |
|  | IF NEEDED, I WILL STAY AFTER SCHOOL TO WORK ON MY NOTEBOOK, **BEFORE** THE DUE DATE TO GET MY NOTEBOOK IN ORDER |
|  | I WILL WRITE ALL LEQ’S IN MY NOTEBOOK AND LEAVE 5 LINES OF PAPER UNDER IT TO ANSWER AFTER THE LESSON. I WILL DRAW A BOX AROUND IT TO SAVE THE SPACE |
|  | I WILL MAKE SURE THAT ALL MY WORK IS COMPLETED IF NOT IN CLASS, AS HOMEWORK |
|  | IF I FEEL I AM NOT UNDERSTANDING OR I FEEL BEHIND FOR WHATEVER REASON I WILL TALK TO THE TEACHER AND ASK FOR HELP BEFORE IT AFFECTS MY GRADE |
|  | I UNDERSTAND THAT I WILL BE TAKING A SCIENCE EOG AT THE END OF THE YEAR SO I MUST KEEP UP WITH ALL ASSIGNMENTS AND BE ORGANIZED. |
|  | I UNDERSTAND IF I AM ABSENT, I HAVE 2 DAYS PAST THE DATE OF THE ABSENCE TO MAKE UP ALL ASSIGNMENTS, EVEN IF I HAVE TO STAY AFTER SCHOOL TO MAKE UP A LAB. IT IS MY RESPONSIBILITY TO ASK FOR MAKE UP WORK AND COMPLETE IT. |
|  | I UNDERSTAND THAT I MUST WRITE DOWN **ALL** ASSIGNMENTS IN MY AGENDA BEFORE LEAVING THE CLASSROOM EACH DAY. |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HAVE AGREED TO THE ABOVE BY INITIALING BESIDE EACH. I UNDERSTAND I WILL BE SUCCESSFUL IF I FOLLOW THE ABOVE GOALS.

STUDENT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HAVE GONE OVER THE ABOVE WITH MY CHILD AND AGREE TO HELP HIM/HER TO BE SUCCESSFUL THIS YEAR BY ASKING FOR PROGRESS REPORTS ON DESIGNATED DATES AND LOOKING AT MY CHILD’S AGENDA BOOK FOR ASSIGNMENTS. I WILL CALL OR CONTACT THE TEACHER VIA EMAIL OR ASK FOR A CONFERENCE IF I HAVEN’T SEEN A PROGRESS REPORT. PROVIDE BELOW THE BEST WAY TO CONTACT YOU.

PARENT SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE CONTACT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*MRS. SHORE and MS. FAGG ARE DEDICATED TO MAKING SURE YOUR CHILD IS SUCCESSFUL IN SCIENCE CLASS THIS YEAR. WE LOOK FORWARD TO WORKING WITH YOU AS A PART OF YOUR CHILD’S SUPPORT TEAM AT WALKERTOWN.*

THANK YOU,

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Ms. Kathy Fagg Mrs. Jessie Shore