Safety and Rules Agreement

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ have read and understand the classroom rules, the classroom expectations, and have read the class syllabus. I understand the class expectations for behavior, work submission and completion, and work resubmission. I am also aware of the penalties for violating the classroom expectations.

* I understand that the classroom rules and expectations are put in place to create a productive working and learning environment for myself and all students. I understand that Mr. Kish enforces a 3 strikes policy and that exceeding these strikes can result in the reduction of my grade, loss of privileges and suspension of equipment use abilities.
* I understand the cell phone policy, will abide by it, and will not question the instructor on any punishment due to cell phone abuse.
* I understand that my actions may jeopardize my safety and the safety of those around me and I will try to keep myself and my classmates safe to the best of my abilities.
* I understand that if the teacher and administrators feel that I am unsafe in this class and a threat to others I will be punished and/or possibly removed from class.

Parent Info:

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| Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Alt:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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Student signature and date Parent signature and date