



A+ Participation Agreement

Name: _____

Address: _____

Graduation Year: _____ Student ID#: _____

Social Security # _____ Student Phone: _____

I wish to participate in the Smithville R-2 School District A+ Program. My signature indicates that I understand that state payments for tuition and general fees are subject to state budgeting processes and are dependent upon the availability and appropriation of funds by the Missouri General Assembly.

I agree to:

1. Attend a designated A+ school for three consecutive years prior to graduation.
2. Graduate with a minimum, cumulative, unrounded GPA of 2.5.
3. Graduate with a minimum, cumulative, attendance rate of 95%.
4. Maintain a record of good citizenship at school and in the community.
5. Avoid the use of illegal drugs, alcohol, and tobacco
6. Perform a minimum total of 50 hours of unpaid tutoring.
7. Complete and document the submission of FAFSA during the spring of my senior year.
8. Register with selective service if required to do so by law.
9. Meet all local A+ deadlines by submitting all required documentation.

To maintain A+ eligibility in college, I understand that:

1. I must be registered as a full-time student, as defined by the college.
2. I must be working toward the completion of an approved program of study.
3. I must maintain a cumulative, minimum, unrounded GPA of 2.5.

Signatures indicate that the participant and their parent/guardian understand the A+ Schools Program requirements as printed on this document.

Parent/Guardian Signature and Date

Participant Signature and Date