Honors Physics Disclosure Agreement

* I have read and understand the 2013-2014 Honors Physics Disclosure.
* I agree to adhere to the class policies and procedures.
* I agree to pay the $10 lab fee required for consumable lab supplies. I will pay the front office and bring the receipt to Ms. Carlson.
* I understand that this is a Flipped Classroom and that I need to come prepared to class so that I can work with Ms. Carlson and my peers to develop a deep understanding of course concepts and skills.
* I understand that internet access will be essential to my learning experience and agree to inform Ms. Carlson if access is problematic so that we may work together to find a solution that works for me.
* I understand that this class uses standards-based grading and that I will receive better feedback from this grading system, helping me know exactly what I understand and what I need to study further.
* I understand that this is a challenging course. I pledge to work to the best of my ability to achieve success. I acknowledge that I have what it takes to be successful in this course and I will not let myself down.

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Student Name (Print) Student Class Period

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Student Signature Date

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Parent/Guardian Signature Date