



**AVID AGREEMENT – HIGH SCHOOL  
ADVANCEMENT VIA INDIVIDUAL DETERMINATION**  
**School Year \_\_\_\_\_**

Name of Student: \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

**Students Goals:**

1. Academic success in college preparatory courses.
2. Successful completion of college eligibility requirements.
3. Enrollment in four-year college or university after high school graduation.

**Student Responsibilities:**

1. Maintain satisfactory citizenship, behavior, and attendance in all classes.
2. Maintain the AVID binder with assignment/grade sheets and daily notes in all classes.
3. Complete all homework assignments given from all of your teachers each night.
4. Maintain enrollment in college preparatory courses with at least a 2.5 GPA – working toward a 3.0 GPA.
5. Prepare for and enroll in at least one AP class by junior year.
6. Prepare for and enroll in at least one Honors class by sophomore year.
7. Actively seek additional help in classes in which the student is earning below a C.
8. Maintain at least a 3.0 in the AVID elective class.

**Student Agreement:**

I agree to accept enrollment into the AVID elective class, which will offer academic support to me. I want to succeed and I understand that I must take individual responsibility for my own success. I understand that in order to give fair consideration to my involvement with the program, I must remain enrolled in the AVID elective for at least one year, and that I will be allowed to remain in the program only if I meet the student responsibilities outlined above. I also understand that studies show that I will be most likely to demonstrate academic improvement if I remain in the program at least three years and most likely to meet my goal of four-year college enrollment if I remain in the AVID program in my senior year of high school.

\_\_\_\_\_  
Student Signature

**Support Agreement:**

We agree to support the efforts of this student in meeting the goals outlined above.

\_\_\_\_\_  
AVID Program Teacher Signature

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
AVID Counselor Signature

\_\_\_\_\_  
AVID Site Administrator Signature