



Mobile County PUBLIC SCHOOLS

Learning Today. Leading Tomorrow.

Magnet Programs Contact Information

Magnet phone: 251-221-4039

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MCPSS MAGNET SCHOOLS PARENT CONTRACT

STUDENT NAME: _____ **SELECTED SCHOOL:** Clark-Shaw **GRADE:** _____

Welcome to the 2022-2023 school year in Mobile County Public Schools where we are "Learning Today, Leading Tomorrow." Congratulations on your child's admittance into one of our stellar magnet programs! By choosing to send your child to an open-zoned school of choice, you are agreeing to adhere to the high expectations of the school of choice. Please carefully read and discuss the following commitment statements with your child and initial each one to indicate you have read and agree with each item. A returned contract is necessary for continuation in the magnet program so that all parents and students are aware of magnet school expectations.

Initial Each Line: **Magnet School Policies and Procedures**

- _____ I understand the school my child has been selected to attend is an open-zoned school of choice. This means my child has a zoned school of attendance for which he/she can attend, but I am choosing to place my child at the named magnet school which has a UNIQUE SET OF RULES, POLICIES, and PROCEDURES to which my child and I must adhere. Therefore, I will cooperate and work collaboratively with the school staff for the benefit and success of my child.
- _____ I understand that each magnet school has uniform and dress guidelines which are unique to magnet schools. *We expect our students to "dress for success!" By choosing to send my child to a MCPSS magnet school, I am choosing to adhere to the dress-code of my school of choice.*
- _____ I understand that magnet schools have grading and retention policies which differ from other MCPSS schools. *Refer to the magnet grading scale: 90-100 - A, 80-89 - B, 70-79 - C, 69 & BELOW - DOES NOT MEET MAGNET STANDARDS. Students who score less than a 70 on their final yearly average in any subject area will be required to REPEAT THE GRADE AT THEIR ZONED SCHOOL OF ATTENDANCE FOR PROMOTION OPPORTUNITY.*
- _____ I understand the importance of school attendance and its impact on academic success. *GREATER THAN FIVE (5) UNEXCUSED ABSENCES AND FIFTEEN (15) UNEXCUSED CHECK-IN (TARDIES) OR CHECK-OUTS IS CONSIDERED EXCESSIVE AND MAY RESULT IN TRUANCY VIOLATIONS AND/OR LOSS OF PRIVILEGE TO RETURN TO THE MAGNET PROGRAM.*
- _____ I understand that all students deserve to learn in a safe, caring, and orderly environment free from distractions. *DISCIPLINE CRITERIA: Students with 3 or more suspensions, one suspension for 5 or more days, and/or any C, D, or E offense may be recommended for removal from the magnet program immediately. Students who incur five (5) or more Class "B" offenses within an academic period will be removed from the magnet program for at least one full academic year.*
- _____ I understand that MCPSS Choice Schools are open-zoned schools of choice which means I am responsible for the transportation of my child to and from a school which may or may not be located near my home or work. *I will abide by all rules and guidelines set forth by my child's choice school regarding drop off and pick up including times, locations, carpool lines, walking, bus locations, etc. I will abide by the rules of my zoned school when dropping off my student for magnet bus transportation (where applicable). I understand that violating these rules and guidelines can result in my child being removed from the school of choice.*
- _____ I understand that I must complete the registration process within the timelines provided by my school and district. *Online and on-site registration requirements must be met according to times provided for the school year and recommitment may be required.*
- _____ I understand that my child's continued enrollment at the selected school is NOT FINAL UNTIL HIS/HER FINAL REPORT CARD HAS BEEN REVIEWED, all entrance and discipline criteria have been met, and on-line and on-site registration have been completed. In addition, if I choose to remove my child from the magnet program my child will not be eligible to attend a magnet school for at least one academic school year.

Parent Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

Parent Name – Printed: _____ **Date:** _____

Student Name – Printed: _____ **Date:** _____