

# **AGS Parent-Student Signatures Assurance Form**

**(To be read and signed by parent/guardian and student nominee)**

Signing this page indicates parents/guardians and nominees fully understand their responsibilities if nominees are selected to attend Arkansas Governor's School. Nominees and their parents/guardians are required to sign this form. This form must be printed, signed, and returned to the school official responsible for submitting the school's nomination form.

## **2015 Arkansas Governor's School Leave Policy**

The Governor's School is state funded, highly competitive, and interested in fostering a strong sense of community. Therefore, students who have accepted a place at AGS should not take temporary leaves from the program. Time away from the program has an undesired effect on student participation, both for the individual and for the AGS community at large. Although we hope that invited students will accept our invitation to attend for the full six weeks, we understand that other quality opportunities are available and difficult choices must be made. Students desiring to take advantage of other opportunities that coincide with AGS should decline the AGS invitation which will allow another student to be invited to attend. Requests for special leaves of absence must be made in writing at least one (1) week in advance and include explicit justification for the leave. A temporary leave may be granted only for the following special situations:

- unplanned personal or family emergencies
- weddings of immediate family members
- extremely important events of major personal, regional, or national significance

Leaves will **not** be granted if:

- proper paperwork has not been filled out and submitted according to the one week timeline
- the leave is for a period of more than 2 class days
- the leave is during the first 3 days or the last 3 days of the program
- the student has already been granted a leave

**I understand that students must commit to attend the entire length of the program, June 14 to July 25, 2015. I certify** that I have read and understand the above information and **consent** to its terms and that the information in this application is correct to the best of my knowledge. I hereby **consent** to my son's/daughter's nomination to the Arkansas Governor's School and for the school officials to report my child's achievement and aptitude test scores. I also **waive my right** to review any comments/information supplied.

Printed Parent Name:	Date
Parent Signature:	

**I certify** that I have read and understand the above information and **consent** to its terms. **I certify** that the information in my AGS application is correct to the best of my knowledge and that the essays I have submitted are mine. **I understand** that all school data in support of my nomination are available to the Student Selection Committee and I **waive my right** to review any comments/information supplied. **I hereby submit my name for nomination to the Arkansas Governor's School and agree that if accepted, I will attend for the entire program, June 14 to July 25, 2015.**

Printed Student Name:	Date
Student Signature:	