

STUDENT INFORMATION & CONTACT SHEET

Please PRINT neatly in blue or black ink.

Name (LAST, First): _____

Period: _____

Home Address: _____ Home Telephone #: _____

Father's Name: _____

Mother's Name: _____

Telephone Number: _____

Telephone Number: _____

Work Place: _____

Work Place: _____

Work Telephone: _____

Work Telephone: _____

Father's e-mail : _____

Mother's e-mail : _____

Alternate Contact: _____ Telephone Number: _____
(Name and Relationship)

Medical Considerations: _____

Hobbies or Interests: _____

For what reason(s) did you take this particular course? _____

What are your expectations for this course? _____

What is your career path or what are your educational goals? _____

Date	Form of Communication	Comments / Reason
		Tardy 1
		Tardy 2
		Tardy 3
		Tardy 4
		Tardy 5
		Tardy 6
		Tardy 9
		Tardy 12

Honor Pledge for Mr. Calderón's Class

I pledge, on my honor, to respect the work of others as well as that of my own. Though collaboration is essential for certain assignments, specifically the collection of data, I will nonetheless labor for my own analyses and conclusions on laboratory assignments and ensure that any calculations on homework assignments are my own. Therefore, I will not copy any work that is not my own, nor shall I claim credit for any work that is not my own. In accordance with this principle neither shall I allow any other student to copy any of my work, in part or in whole.

I understand that copying, plagiarism or collusion is wrong, and as such, I will not participate in any of these activities nor tolerate it in my peers. I will notify my instructor should I become aware of any such activity. I am also aware that according to the Capt. John L. Chapin High School policy on academic dishonesty, engaging in such activities - or failure to report such - may result in loss of credit, loss of laboratory privileges and an administrative referral for further disciplinary action, as well as expulsion from certain clubs or organizations.

Please print full name clearly.

I, _____ do hereby abide by this pledge and the consequences thereof.

Student Signature: _____ Date _____

Parent Signature: _____ Date _____

I have read and understand Mr. Calderón's **Classroom Policy**.
By signing below, I agree to abide by the Policy and the consequences thereof.

Student's Printed Name: _____ Period: _____

Student's Signature: _____ Date: _____

Parent Signature: _____ Date: _____

I have read and understand Mr. Calderón's **Laboratory Safety Rules & Contract**.
By signing below, I agree to abide by the Contract and the consequences thereof.

Student's Printed Name: _____ Period: _____

Student's Signature: _____ Date: _____

Parent Signature: _____ Date: _____