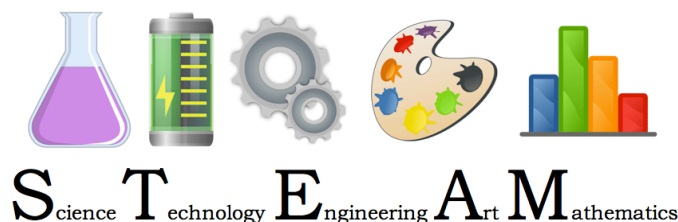


AP Calculus AB
Mr. Smoyer
2017-2018 School Year
Course Signature Return



Please sign and RETURN this page

Advanced Placement (AP) Calculus

I have read and understand all information (course syllabus/rules and expectations) regarding Mr. Smoyer's AP Calculus class. If I have any questions, I understand that I may discuss them with him at a mutually acceptable time.

Perquisite and Course of Study

I have read and understand all information regarding the mathematics course of study and the prerequisite requirements for the above course. If I have any questions, I understand that I may discuss them with him at a mutually acceptable time.

Technology Use

I have read and understand the School Board Policies related to the use of the district technology (1-to-1 Program) and I agree to abide by the procedures and rules set forth in these Policies. I understand that failure to follow technology guidelines in class will result in disciplinary action.

Student Name (Please PRINT)

Student signature

Date

Parent signature

Date

*NOTE: In order to preserve paper and our environment the documents described online are available for viewing through the Parent Portal or by logging onto my website (<http://www.myteacherpages.com/webpages/jsmoyer/>)

Hard copies are available upon request.