**Adelaide Lee Elementary**

**Title I Parent/Teacher/Student Compact**

Student's Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_ Date Fall 2018

To accomplish this, parents, teachers and students need to work together. We ask that you promise to do this by completing and signing the part of this compact that belongs to you.

**Parent/Significant Adult checklist Includes:**

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I will do my personal best to:

\_\_\_\_\_ Require 30 minutes reading aloud with my child each day.

\_\_\_\_\_ Supervise daily attendance and the completion of student homework.

\_\_\_\_\_ Contact the teacher when my child expresses comments about school that indicate positive interest, skill or

special need.

\_\_\_\_\_ Require my child to be responsible for his/her behavior, attitude and effort at school and home.

\_\_\_\_\_ Volunteer as a classroom or school helper. (We suggest at the minimum 30 minutes at least 3 times per year. We encourage parents to volunteer for a weekly lunch or recess duty or a weekly “center” helper)

\_\_\_\_\_ Attend at least four (4) school functions/assemblies. (P/T Conferences, Parent Involvement Nights, PTA Meetings, Open House, Parent Involvement Day Activities, Field Trips, Celebrations/Events- *Fall Carnival, Grade Level Parent Nights, student talent show, super kids day, student awards assembly, career day etc…*)

\_\_\_\_\_ Write in your own suggestion. (What special skill or activity can you share?)

Suggestion:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent's/Significant Adult's Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_

**Student checklist Includes**:

I will do my personal best to:

\_\_\_\_\_ Become a positive thinker, confidently believing if I do my best, I will succeed.  
\_\_\_\_\_ Accept responsibility for my behavior, choices and attitude at school and home.

\_\_\_\_\_ Follow the 8 expectations for living and practice the life principles. (Great Expectations)

\_\_\_\_\_ Complete my daily assignments and homework.

\_\_\_\_\_ Read 30 minutes each day.

\_\_\_\_\_ Agree to do the best I can in school.

\_\_\_\_\_ Attend school each day.

Write in your own suggestion. (What can you do to help yourself succeed?)

Suggestion:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

**Teacher checklist Includes**: .

I will do my personal best to:

\_\_\_\_\_ Provide a safe and caring learning environment.

\_\_\_\_\_ Establish high expectations for all students.

\_\_\_\_\_ Teach in the best way I can using research-based strategies.

\_\_\_\_\_ Use Great Expectations (GE) in my classroom.

\_\_\_\_\_ Keep you informed of your child's progress on a regular basis.

\_\_\_\_\_ Provide the structure and guidance so students can learn to accept responsibility for behavior, choices and

attitude at school. I will model and hold students accountable for the 8 daily expectations.

\_\_\_\_\_ Assign homework and record the return of homework.

\_\_\_\_\_ Provide ideas you can use at home to help your child.

\_\_\_\_\_ Take into account individual strengths of each student.

\_\_\_\_\_ Write in your own suggestions. (What can you do to help yourself succeed?)

Suggestion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THANK YOU FOR YOUR COMMITMENT TO OUR PARTNERSHIP.**