

## Academic Support Agreement- Upper School 2019-2020

For students **without** a current psycho-educational evaluation on file, select from Pre-Access Level:

Pre-Access Level	
My child does not have a current psycho-educational evaluation of I want my child to enroll in the Study Skills Plus course. (free I want my child to enroll in a Basic Math course. (\$500- SMA I acknowledge that my child is not eligible for any accommod	e of charge) ART charge)
For students <b>with</b> a current psycho-educational evaluation on file,	select from one option below:
Access Level	
I want my child to enroll in the Study Skills Plus course. (free want my child to enroll in a Basic Math course. (\$500- SMATI intend to request accommodations for ACT. (\$500- SMARTI acknowledge that my child is only eligible for in-class accommodations for ACT.	ART charge) T charge)
<u>Tier One</u>	
I agree to pay the SMART charge of \$90/month. (x11 installnum limit want my child to enroll in the Study Skills Plus course. (free limit want my child to enroll in a Basic Math Course. (\$500- SMA limit limit limit limit limit limit weekly executive function support with the learning specialist.	e of charge) ART charge)
<u>Tier Two</u>	
I agree to pay the SMART charge of \$190/month. (x11 instal want my child to enroll in the Study Skills Plus course. (free I want my child to enroll in a Basic Math Course (included in a cknowledge that my child is eligible for in-class accommodand will receive weekly executive function support during study has	e of charge) n cost) dations and testing accommodations,
Return this form to <a href="mailto:cring@ecseagles.com">cring@ecseagles.com</a> by <a href="mailto:Monday">Monday</a> , <a href="mailto:May 6">May 6</a> . All a take place between August 8-19 and both the student and parent()	
Student Name	Grade
Darent Signature	Date