

# Advanced Placement Awareness Form for Non-IB Students

## Final Deadline to submit form: February 22nd, 2021

The College Board's Advanced Placement Program offers motivated high school students the opportunity to take challenging college-level courses while in high school. These courses are taught by high school teachers, who utilize course descriptions developed by committees of university professors and experienced AP teachers. The decision to take one or more Advanced Placement courses is a very important decision.

**Please complete this form with your registration material.**

### I. Awareness Statement

**Counselor's advice:** Based on the experience of AP teachers, parents and counselors, it is recommended that you select your AP course load very carefully. All students need to be very aware of their levels of commitment for academics, extra-curricular activities, and student employment during their sophomore, junior, and senior years.

**Statement of Awareness:** I understand that AP courses are based on national curricula and taught on a college academic level. I understand that the course requires more effort and homework than a standard or honors level course. Also, I understand that I will be expected to exercise critical thinking skills, utilize problem solving skills, write fluently, and absorb masses of content material covered on a daily basis. Therefore, I will commit to spending more time and energy to be successful in this class. The selection of an AP course is a serious commitment, which I am willing to make. **WE UNDERSTAND THAT THIS REGISTRATION CONSITUTES A YEAR COMMITMENT TO THE SELECTED COURSES, AND if a student drops a class once the term has begun, it is only with the Principal's approval and the grade of "WF" will be on his or her report card and transcript. It will be averaged into the overall GPA as a failing grade.**

All Information must be completed below.

Print Student Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

**AP Courses and Signatures:** List the name(s) of the desired AP Course(s):

Course: \_\_\_\_\_ Teacher Recommendation Signature: \_\_\_\_\_

Course: \_\_\_\_\_ Teacher Recommendation Signature: \_\_\_\_\_

Course: \_\_\_\_\_ Teacher Recommendation Signature: \_\_\_\_\_

Course: \_\_\_\_\_ Teacher Recommendation Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Day Time Phone/Cell Number: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

\*\*\*\*\*Upload completed form in Canvas\*\*\*\*\*