## ADJUSTED DAY PROGRAM (ADP) APPLICATION

Student Name	
School Year:	Date Submitted:
Preferred Term/Period for ADP (check)  Fall Block 1 Fall Blocks 1 & 2 Fall Blocks 3 & 4 Fall Block 4  I am requesting to participate in the ADP Pr	Spring Block 1 Spring Blocks 1 & 2 Spring Blocks 3 & 4 Spring Block 4  cogram for the following reason(s):
Work (I work at	)
Volunteering (I volunteer at	)
College Course (I take a college course	e outside the school day at)
Other, please describe.	
	*******
I have read the above application and am in su	upport of pursuing this option if it is possible.
Parent Signature	
****	*******
I have read the guidelines for participating in th	ne ADP program and agree to abide by these guidelines.
Student Signature	
****	********
I approve the above student and his/her plan for	or participation in the ADP Program.
Principal Signature	

## **ADP GUIDELINES**

- ADP is for Seniors only.
- Students may indicate which period they prefer the ADP, although this is not a guarantee.
- Only 4 blocks in a cycle each semester are allowed for ADP regardless of how much study hall time a student has.
- Students need to support their request for ADP in writing.
- Parent permission is required.
- Students must be in good academic standing as well as have good attendance. ADP WILL be taken away if student does not maintain grades!!
- School administration may periodically review the ADP plan and invite students to share their experiences. If this is the case, ADP students are expected to attend.
- Transportation is the responsibility of the student/parent.
- Students may not remain in the building during ADP time. If a student needs to be the building during their ADP time (for Music Lessons, make up a test, work with a teacher, use the library, etc.) they MUST notify attendance that they are in the building and what teacher they will be working with.