

## **Policies and Expectations for Student Conduct**



| Student Name:   |  |  |
|---|--|--|
|   | e Print  |  |
| Expectations for acceptable Computer Use, Student Intentions Intention Policy. I understand the enrollment from ATAM. Ifu | e Academy of Technology and Advanced Manufacturing's Policies and student conduct, academic dishonesty, the Wake County Public School System's rnet Access, and Electronic Mail policy. I agree to follow all the rules contained in at if I violate the rules I will be subject to disciplinary action and possible unthermore understand that my child may be un-enrolled from the ATAM spension from school for any of these infractions or any other WCPSS |  |
| Student Signature   | Date   |  |
|   |  |  |
|   |  |  |
|   |  |  |
| Parent/Guardian   |  |  |
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| Parent/Guardian Name:   | Please Print   |  |
| Home Phone:   | Work/Cell Phone:   |  |
| Parent/Guardian Signature:  |  |  |
| Date:   |  |  |
| = =:==:   |  |  |

Please return this form to Mr. Evans Room 2332