

Performance Learning Center (PLC) APPLICATION

Student must have attempted 9th grade to be considered

Date: _____ Student's Name _____ Age ____ Gender ____

Date of birth _____ Zoned school _____ Grade ____ Credits ____

Address- include city, zip code _____

Phone _____

Email _____

Student lives with: Parent(s) ____ Other family ____ Guardian ____ Other ____

Name of person you live with _____

Phone number of that person _____

IT IS MY INTENT TO:

Attend the PLC until all requirements are met

Attend PLC and return to my zoned school when my requirements are met

Use another option to get my diploma/GED (Augusta Tech, Job Corps, Youth Challenge, etc.)

Drop out

TRANSPORTATION:

I will use the RCSS bus hub (contact Transportation 706-796-4777 to coordinate)

Provide my own transportation (____city bus, ____car, ____walk, ____Uber, etc.) select a response

I am employed: Part-time ____ Full-time ____ I am seeking employment ____ Not employed ____

The reason I would like to attend the PLC (Performance Learning Center): _____

I receive Special Education Services Yes ____ No ____

I have a 504 Plan Yes ____ No ____

I have medication that must be taken at school Yes ____ No ____

I have allergies Yes ____ No ____

I am allergic to: _____

Date _____ Counselor's Name _____

*****TO BE COMPLETED AT ORIENTATION*****

AGREEMENT- I agree to follow the expectations of the PLC to:

- Attend the program on scheduled days (M-Th)
- Attend the program on time (according to the schedule: 8:15am-3:15pm)
- Make progress in assigned courses (monitored every 3 weeks)
- Complete courses to earn credit for graduation
- Follow the program rules and expectations

I understand that failure to meet these expectations may require that I consider other options to earn my high school diploma/GED.

Student's Printed Name _____

Signature for agreement _____

Parent's Signature for agreement _____ Date _____