

**Literacy A / B Disclosure Document**  
**2016-2017 Aaron Smith**

Welcome back to another year at Independence. In this English support class we will focus on connecting English skills with events and themes in real life. We hope this year will be fun and educational for you. Specific IEP needs and accommodations will be addressed in a private and respectful manner in our class.

**Rules/Expectations**

Our rules

1. Respect: Be respectful of yourself, the teacher, your classmates, and the classroom
2. Use class time to learn.
3. Don't talk while Aaron is talking.

IHS consequences will be followed as needed.

1. Warning
2. Student/Teacher Conference
3. Parent Contact
4. Principal Referral

IHS Cell Phone Policy

Cell phones or any electronic device (including ear phone) should not disrupt the learning environment. Students may ONLY use Electronic devices before school, during lunch, passing periods, and after school. Students may NOT use cell phones in the hallway during class time or in class at ANY time. If students use electronic devices during prohibited times, the phone will be confiscated and given to administration.

- 1st Offense: Cell phone returned to student after school by administration.
- 2nd Offense: Cell phone returned to parent/guardian only by administration.
- 3rd Offense: Phone will be returned after 6 days and a disorderly conduct will be filed with the school officer.
- 4th Offense: Loss of cell phone privileges for remainder of the school year.

**Supplies**

You will need the following supplies every day:

1. Book for reading (must be a chapter book)
2. Writing utensils (pencils or pens)

**Grades**

All class work will be graded as follows:

A	94 - 100%	C +	77 - 79%
A-	90 - 93%	C	73 - 76%
B+	87 - 89%	C-	70 - 72%
B	83 - 86%	D	60 - 69%
B-	80 - 82%	F	59 and below

Email is the best way to contact me with questions and concerns. My email address is [aaronsmith@provo.edu](mailto:aaronsmith@provo.edu) Please list any email addresses you currently use so I can contact you.

Please sign, detach, and return to your teacher.

**Aaron Smith Lit A / B**

By signing this, I acknowledge that I have read the above document and accept and support its policies in full.

\_\_\_\_\_  
Parent/guardian email address 1 (Required)

\_\_\_\_\_  
Parent/guardian email address 2 (Optional)

\_\_\_\_\_  
Parent/guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student name (PLEASE PRINT)

\_\_\_\_\_  
Student email address (If available)