

US History Policies Agreement and Film Permission Form

Student Name _____

Date _____ Per. _____

Please check **ALL** that apply below to indicate that you understand the policies and give consent to your student:

_____ I understand Ms. Sutton's policies regarding assignments, grading, conduct, and attendance

_____ I understand the class policies about behavior, dress policy, and electronic devices

_____ I allow my child to view PG, PG-13, and R rated films pertaining to History-Social Science.*

Signature of **Parent/Guardian**

Signature of **student**

Printed name of **Parent/Guardian**

Printed name of **student**

* note to teacher qualifying this permission, if needed:

Please do not cut...return entire page to teacher...thanks!

Parent/Guardian Contact information:

Parent/Guardian (1) Name (please print) (area code) phone number best time to reach you at that number

Email address: _____

Parent/Guardian (2) Name (please print) (area code) phone number best time to reach you at that number

Email address: _____

Thank you!

Student Profile

Student Name _____

Please fill this out so I can get to know you a little bit.

1. Contact information

cell phone number (if you have one): _____

email address (if you have one): _____

2. Favorite Subject _____

3. Activities and interests (hobbies, sports, social activities, special skills, job, etc.) _____

4. Favorite Music/Musician/Band _____

5. Favorite TV shows/Movies/Actors _____

6. Heroes (people you admire) _____

7. Favorite Books/Characters _____

8. Favorite Quotation _____

9. College/Career plans _____

10. Class activities you enjoy: _____

11. History topics that interest you: _____

12. Course expectations _____