

AVID Parent Information Sheet

Parent[s] / Guardian[s] Name _____

Student Name _____

Daytime Phone _____ Evening Phone _____

Mailing Address _____ City _____

E-mail Address _____

Please respond to the following questions.

• Did either parent attend college? If so, please provide the name of the college, dates attended, and, if applicable, the year graduated: _____

• What are your child's strengths? Please give examples. _____

• In what areas do you see your child needing support? Please explain. _____

• What would you like to see your child gain by being in the AVID Program? _____

• I am willing/able to support my child with the following [check all that apply]:
 AVID Booster Club officer transportation to club/sports activities
 attend evening meetings fundraising for AVID program needs
 parent conference follow-up academic/discipline issues

• What concerns do you have regarding your child being required to take the AVID elective class every year? [NOTE: 9th and 10th grade students select two electives; 11th graders select 3 electives?]

• What concerns do have about your child being required to take honors/ Advance Placement classes every year? What help might s/he need to be successful? _____

• In what areas does your child need support to prepare him/her for college? _____

• How much do you think your child needs the AVID program in order to attend and succeed in college? Why? _____

• Are there any special circumstances [free/reduced lunch, Special Education/504, single parent household, etc.] or other situation for your child which the AVID program would help support?

