

MY SCIENCE COMMITMENT PLEDGE

I, _____ (name),

from _____ (school district)
do solemnly commit to accept all the responsibilities as a participant of this chosen science group.

_____ I understand that I have been chosen or volunteered to participate in this program and that I am a representative of my school district as well as Calvin College.

_____ I will attend the program one day a week for one year, beginning January 2008 – December 2008.

_____ I will tell Coach Eriks or my contact adult / teacher when I cannot attend a future program session.

_____ If I am sick on a session day, I will check with another student to see what I missed.

_____ I will come to Calvin ready to have fun and learn.

_____ I will come to Calvin prepared each day.

_____ I will respect and listen to the teacher's / adult's words.

_____ I understand that if I choose certain behaviors, an adult will give me a warning. If I continue that behavior, there will be a consequence. Consequences may include missing out on the next field trip, experiment, or dismissal from the program.

_____ I understand that there are different levels of science ability in my group but I will ALWAYS do my PERSONAL BEST.

_____ I understand that only a handful of students in all of Michigan have this opportunity and I will make the most of it! LET THE FUN BEGIN!

Parental support signature _____

Student signature _____