



NEW YORK CITY DEPARTMENT OF EDUCATION

THOMAS A. EDISON CAREER & TECHNICAL HIGH SCHOOL

165-65 84th Avenue * Jamaica, New York 11432 * (718) 297-6580 * Fax (718) 658-0365
www.thomasedisonhs.org

Anthony Barbetta, *Principal*
Adam H. Boxer, *Assistant Principal,*
School Safety & Security

Thomas A. Edison High School Student Behavioral Contract

I, _____, am a student at Thomas A. Edison Career & Technical High School. I hereby agree to:

- Come to school on time.
- Arrive to all my classes on time.
- Being where I belong (as per my program card) on time.
- Be prepared in class with appropriate materials and assignments.
- Act kindly and show respect to all members of the learning community.
- Resolve conflicts peacefully and avoid fighting inside or outside of the school or program sites.
- Behave respectfully, without arguing, and cooperate when a staff member gives a direction or makes a request. I understand that I will be given an opportunity to voice my concerns at an appropriate time, if I do not agree with the request.
- Be peaceful by using a calm voice and walking quietly so others can learn.
- Take responsibility for my personal belongings.
- Respect other people's property.
- Dress appropriately by not wearing hats, or clothes which have any signs of gang affiliation, (e.g. scarves, do-rag, bandanas) or any overly suggestive clothing (including skinny tank tops, mid-drifts, short-shorts, or mini-skirts). Wear pants or jeans too low so that your undergarments are in view of others.
- Refrain from using gang signs, calls, chants, movements, and handshakes or other gestures that are inappropriate for the school environment.
- Help keep weapons, illegal drugs, controlled substances, alcohol and cigarettes out of school.
- Refrain from bringing to school personal possessions that are disruptive (e.g. cell phones, Ipods, cameras, beepers, pagers and other electronic devices).
- Share information with school officials that might affect the health or safety of the school community.
- Keep my parents or guardian informed of school-related matters and make sure they receive any information sent home for them.
- Eat during designated periods and only in the lunch room.
- Follow all rules in the **Chancellor's Discipline Code**, a copy of which is enclosed with this contract.
- Behave responsibly as described in the **Bill of Student Rights and Responsibilities**, a copy of which is enclosed with this contract.

If I do not honor this contract, I understand that I will have to face consequences including, but not limited to the following:

- ◆ Conference with staff member
- Agreement to a new behavior contract describing my future conduct
- Phone call or meeting with a member of my family or my guardian
- Additional counseling
- Conflict resolution
- Peer mediation
- Removal from the class for up to four days
- Principal's and In-House suspension for up to five days
- Superintendent's suspension that may result in expulsion.

***PLEASE KEEP THIS PAGE WITH YOUR RECORDS**



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PLEASE RETURN THIS COPY TO YOUR PERIOD 3 TEACHER TOMORROW.

I have read and understand every point in this contract. I agree to follow this contract, and I understand that if I do not honor my commitments, I must face the consequences of my behavior.

Student's name: _____

Signature: _____

Date: _____

I am the parent/guardian of _____, a student at Thomas A. Edison Vocational & Technical High School. I have read and understand this contract. I understand that if my child breaks this contract, she/he may be disciplined in accordance with the Citywide Discipline Code.

I agree to help my child live up to his/her obligations under this contract by:

- Encouraging my child to be a respectful and peaceful member of the school community;
Reviewing the enclosed Discipline Code and Bill of Student Rights and Responsibilities with my child;
Participating in any discussions and decisions concerning my child's education;
Attending scheduled appointments with school staff;
Providing the school with current phone numbers and emergency contact information;
Alerting the school if there are any significant changes in my child's health or well being that affects his/her ability to perform in school.

Parent/Guardian name: _____

Signature: _____

Date: _____