

**Regional Partnership of Schools and Colleges at
Purchase College
Great Potential Program**



**Congratulations you have been accepted into the Great Potential Program!!!
Please read carefully and have your parent/guardian sign and return to your school site
coordinator.**

Student Acceptance and Permission Form

I _____ **hereby give my daughter/son**
(PRINT FIRST AND LAST NAME)
_____ permission to participate in the
(PRINT FIRST AND LAST NAME)

**2004-2005 STATE UNIVERSITY OF NEW YORK AT PURCHASE COLLEGE
GREAT POTENTIAL ACADEMIC YEAR PROGRAM.** I understand that this program serves as a vehicle for educational support, aimed at improving the academic and social skills of students in school, while in turn exposing students to cultural, recreational, educational and **possible** employment opportunities out of school. The program is dedicated to this improvement and these opportunities by scheduling special classes, events, student conferences, arranging for guest speakers, providing tutorial and homework assistance, scheduling trips, and referring individual, group and family intervention services as necessary; and that my son/daughter is asked to participate in as many of these activities* that his/her school provides as possible.

I understand that **GREAT POTENTIAL** works very closely with each of the school districts, schools and staff members (designated by the program) to provide the most holistic educational approach possible. In that vein, we ask that information such as your child's final grades, promotion and graduation status be provided to us by our **Site Staff** in order to evaluate our success, to improve in program areas we deem necessary.

***GREAT POTENTIAL** also provides activities for parents/guardians and in some cases the families of students in the program.

We would like to thank you in advance for your support of our program, and if you agree with these conditions please sign below.

Student Name (Print) _____ School _____ Grade _____

Parent Name (Print) _____ Contact # _____

Parent Signature _____ Date _____

The Regional Partnership of Schools and Colleges

At Purchase College, SUNY

