St. Joseph Christian High School
A+ Program Agreement

I wish to participate in the A+ Schools Program.

If state funds are available and our high school continues designation as an A+ School prior to my graduation, I may receive reimbursement for college expenses determined by the Missouri General Assembly while attending a Missouri public community college or public vocational/technical school on a full-time basis. This reimbursement may be for the unpaid balance of the cost of tuition subject to legislative appropriation. This financial assistance is on the condition that I meet the following requirements:

1. Attend an A+ designated school for **three (3) consecutive years** immediately prior to high school graduation.
2. Graduation from high school with a grade point average of **2.5 or higher** on a 4.0 scale (non-weighted GPA).
3. Have at least **95 percent attendance** record for the four-year period.
4. Graduate with **50 documented hours of unpaid tutoring** of students in approved settings. (25% may be job shadowing).
5. Maintain a record of **good citizenship** and avoid the unlawful use of drugs and alcohol.
6. Make a good faith effort secure federal post-secondary student financial assistance funds during the last semester of senior year. Complete and **submit the FAFSA** online.
7. Score proficient or advanced on a high school math standardized test or **minimum score of 17 on ACT Math** Sub-score, 43 Compass Pre-Algebra, or 1 on Compass Algebra.
8. All males age 18 must **register for the Selective Service**. Male students may register online at www.sss.gov.

To maintain eligibility after high school graduation, I understand that I must meet the following requirements:

1. Enroll and attend on a full-time basis a Missouri public community college or public vocational/technical school.
2. Maintain a grade point average of 2.5 or higher on a 4.0 scale.
3. Make a good faith effort to secure federal post-secondary student financial assistance each year.

_____	_____	_____	_____
Student Signature	Date	Parent/Guardian Signature	Date
_____	_____	_____	_____
A+ Coordinator Signature	Date	Principal Signature	Date

PLEASE PRINT THE FOLLOWING INFORMATION:

Last Name _____ First Name _____ Middle _____

Street Address _____ City _____ Zip _____

Parent e-mail address _____ Date of Birth_____ Age_____

Anticipated Graduation_____ Home Phone Number_____

*The financial incentives of the A+ Schools Program are dependent upon St.Joseph Christian High School's continued designation as an A+ School and state appropriations from the Missouri General Assembly. They are not the funding responsibility of St. Joseph Christian School.