



Intent to Participate in a CTSO Sponsored Event

(Career-Technical Student Organization: *FCCLA, Ed Rising, HOSA, SkillsUSA, FFA, DECA, BPA*)

STUDENT NAME: _____

CTSO (Choose One)

FCCLA
 Ed Rising
 SkillsUSA
 FFA
 DECA
 BPA
 HOSA

Students may participate in CTSO competitive events, activities, and conferences if the following occur prior to competition:

Program Instructor Initials				
	All grades are a "C" or above			
	Q1	Q2	Q3	Q4
English				
Math				
Science				
Social Studies				
Lab				

Acceptable Attendance

- No more than 20 hours per semester.

Acceptable Behavior

- No repeated ISA's or Wednesday Schools
- Less than 5 days OSS

Administrators may give approval or revoke the privilege for students with extenuating circumstances.

Program Instructor Name: _____
(Print) (Signature)

Student Name: _____
(Print) (Signature)

Parent Name: _____
(Print) (Signature)

Step #2:

The student is approved to compete:

Yes **Date:** _____
 No **Date:** _____

_____ (Print) (Signature) Date

(Students will be reviewed QUARTERLY)