



FLORIDA SCHOOL MUSIC ASSOCIATION (FSMA)

Academic Performance Contract for Music Eligibility

Music Performance Assessment (MPA)

I, _____, a student in the _____ grade at _____
 (print student's name) (print school's name)

 (print address, city and zip code)

Telephone: (____) _____ Facsimile: (____) _____,

and my parent(s)/guardian(s) acknowledge that my cumulative grade point average has fallen below the 2.0 on a 4.0 scale that is required for participation in interscholastic activities, according to Florida Statute 1006.15 and the *Rules and Regulations* of the **Florida School Music Association**, of which my school is a member.

I and my parent(s)/guardian(s) understand that while in the **9th** and **10th** grades, I may be permitted to continue to participate in interscholastic music activities each semester provided:

1. I earn a 2.0 grade point average in all courses taken during the previous semester; or
2. I enter into this "Academic Performance Contract for Music Eligibility" with my school; and
3. I enroll and attend summer school as necessary.

I and my parent(s)/guardian(s) further understand that should my cumulative grade point average continue to be below the required 2.0 on a 4.0 scale when I enter the 11th grade, I will not be permitted to participate in interscholastic music activities until such time as my cumulative grade point average is raised to a 2.0 on a 4.0 scale or better and maintained at that level.

I and my parent(s)/guardian(s), therefore will commit ourselves to see that all necessary effort is put forth to raise my cumulative grade point average to that level.

Entered into this _____ day of _____ 20____, by and between:
 (month)

Student: _____ Address: _____
 (student's signature) (home address, city and zip code)

Parent: _____ Name: _____
 (parent's signature) (print name)

Parent's Address: _____
 (home address, city and zipcode)

Principal/Designee: _____ Name: _____
 (signature) (print name)

Music Director,
 As FSMA designee: _____ Name: _____
 (signature) (print name)

Component (FBA, FOA, FVA): _____

Copies: Student retains original. Copies are given to parent, principal and music director.

Send one copy to: Dr. Kathleen D. Sanz, Executive Director
 Florida School Music Association
 402 Office Plaza
 Tallahassee, Florida 32301
 Telephone: (800) 301-3632
 Fax: (850) 942-1793