

Alachua County Teenage Parenting Program



3000 E University Avenue ♦ Gainesville, Florida 32641 ♦ 352-955-6839 ext. 5758

Admission Application

Admission Criteria:

- Enrolled in K-12 Public School
- Contact Guidance Counselor at District Assigned School
- Submit a complete application to the TAP Program.

Requirements to REMAIN in the TAP Program

- Maintain a minimum C average
- Students must enroll in a 0.5 credit course in Parenting Skills.
- Students are bound by the district's Code of Student Conduct for behavior and classroom issues.
- Maintain a good attendance record, meeting attendance criteria established by State and District policy. Absences related to pregnancy or parenting are excused with documentation. All coursework must be made up.

Student Information

Name: _____ Date of Birth: _____
Last First Middle

Street Address: _____ Current Age: _____

City/State/Zip: _____ Phone: _____

Mailing Address (if different from above): _____

Email: _____ Current Grade Level: _____

Current School: _____ Zoned High School: _____

Last School Attended: _____ Date Last Attended: _____

★ What is your expected due date or age of your child? _____ (Answer Required)

Do you need Child Care? Yes No Do you need bus transportation? Yes No

Parent/Guardian Information

Parent/Guardian Name: _____ Cell Phone: _____

Email: _____ Work Phone: _____

Parent/Guardian Name: _____ Cell Phone: _____

Email: _____ Work Phone: _____

Student and Parent/Guardian Agreement

As a TAP student, I will enroll in all required academic courses. I understand that I must abide by the requirements listed on this application in order to remain in the program. Failure to meet these requirements will result in being dropped from the program.

- Maintain a minimum grade point average of C.
- Students must enroll in a 0.5 credit course in Parenting Skills.
- Students are bound by the district’s Code of Student Conduct for behavior and classroom issues.
- Maintain a good attendance record, meeting attendance criteria established by State and District policy. Absences related to pregnancy or parenting are excused with documentation. All coursework must be made up.

I have read this application, the information accompanying it, and the above agreement signed by my son/daughter. I approve his/her participation in this educational program, and I will work with my son/daughter and the TAP, and Academic teachers to ensure that he/she accepts the responsibilities and receives the benefits provided through this program.

Signature of Applicant _____ Date: _____

Signature of Parent/Guardian _____ Date: _____

<p>Required Documents Checklist</p> <ul style="list-style-type: none"><input type="checkbox"/> Copy of the Child’s Birth Certificate<input type="checkbox"/> Child’s Immunization Record - DH Form 680 (obtained from doctor)<input type="checkbox"/> Child’s Health Form - DH Form 3040 (signed by doctor)<input type="checkbox"/> Alachua County Public School’s Emergency Contact Form<input type="checkbox"/> Alachua County Public School’s Home Language Survey<input type="checkbox"/> Department of Children and Families Child Care Application for Enrollment<input type="checkbox"/> Health Policies Acknowledgement<input type="checkbox"/> Influenza Virus Brochure Acknowledgement of Receipt<input type="checkbox"/> Distracted Adult Brochure Acknowledgement of Receipt<input type="checkbox"/> Authorization to Photograph/Record Student Consent and Release Form
--