



Union County T.E.A.M.S. Charter School and High School/College Leadership Academy
515-517 West 4th Street Plainfield, NJ 07060 * PHONE: 908.754.9043 * FAX: 908.754.9053
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"We Are Community Builders...Aiming High and Achieving Greatness"

PARENT/STUDENT HANDBOOK SIGNATURE RECEIPT PAGE

Directions: Please complete this form and return to school on at the School-Wide Orientation. Parents/Guardians and Students must sign below.

_____ (Parent/Guardian initials). I have read and reviewed this handbook with my child(ren) and agree to the terms and conditions placed herein. My child(ren) and I understand the expectations of UC T.E.A.M.S. Charter School and High School/College Leadership Academy and the consequences that will be rendered if those expectations are not met.

Child's Name _____ Grade _____

Child's Signature _____

Child's Name _____ Grade _____

Child's Signature _____

Child's Name _____ Grade _____

Child's Signature _____

Child's Name _____ Grade _____

Child's Signature _____

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Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Thank You for your commitment towards establishing a partnership of success.

Sheila L. Thorpe
Executive Director/
Founder

Brian A. Albanese
Director of Instruction/
Acting Principal -Elementary