

ELIZABETH COBB MIDDLE SCHOOL

Tonja Fitzgerald, Principal
 Matt Roberson, Assistant Principal
 Mike Holmes, Assistant Principal



915 Hillcrest Ave. Tallahassee, FL 32308
 Tel: (850) 488-3364 Fax: (850) 922-2452
 Website: www.cobb.leon.k12.fl.us

ACADEMIC PROBATION LETTER

Date: _____ Nine weeks: _____ To the parents of _____:

As a member of the Applied Science and Technology Magnet Program, students are expected to maintain a 3.0 grade point average (GPA) in their core academic magnet courses: math, social studies, language arts, science and magnet research. A calculated GPA of 3.0 is the equivalent of a B average and there should be no D's or F's in elective classes. Failure to meet these requirements will result in your student being placed in a probationary status for closer monitoring by the parents and the magnet team. This process will begin following the grading period in which they did not successfully meet these criteria.

This letter is to inform you that your student has been placed on academic probation for the following class or classes:

___ MATH ___ LANGUAGE ARTS ___ SOCIAL STUDIES ___ SCIENCE ___ MAGNET RESEARCH

During the academic probation period, your student must comply with the following supportive measures and requirements:

1. Have agenda book signed *each* Friday by each academic teacher noted above documenting they have correctly completed their agenda and turned in their work that week.
2. Attend at least 4 help sessions in the 9-week period for those classes listed above, record the date and have the content teacher verify with their signature in chart below.
3. Improve the overall academic GPA to a 3.0 or better in their math, social studies, language arts, science and magnet research classes.

SUBJECT	DATES OF ATTENDED HELP SESSIONS WITH TEACHER INITIALS				TEACHER SIGNATURE
MATH					
LANGUAGE ARTS					
SOCIAL STUDIES					
SCIENCE					
MAGNET RESEARCH					

This signed letter should be placed in your child's agenda book so students can make the appropriate appointments with teachers. The completed form will be turned in to the homeroom teacher or Mrs. Curry at the end of the Academic probation period. Your child's instructional team and our Guidance Office are here to provide you and your student with any assistance and direction you may need to help your child meet their full potential. If you have any concerns or questions, please contact Page Curry, Program Coordinator, or Matt Roberson, Assistant Principal Cobb Curriculum Services, at 488-3364.

Failure to complete these measures may keep your child from participating in future magnet events.

Student Name: _____

Parent Name: _____

Student Signature: _____

Parent Signature: _____

"The Leon County School District does not discriminate against any person on the basis of gender, marital status, sexual orientation, race, religion, national origin, age, color or disability."

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BEHAVIOR/ATTENDANCE PROBATION LETTER

Date: _____ Nine weeks: _____ To the parents of _____:

As a member of the Applied Science and Technology Magnet Program, students are expected to demonstrate responsible personal behavior in accordance with our school and classroom policies and maintain an acceptable record of attendance. Failure to meet these requirements will result in your student being placed in a probationary status for closer monitoring by the parents and the magnet team and possible revocation of their reassignment status. This process will begin following the grading period in which they did not successfully meet these criteria.

This letter is to inform you that your student has been placed on academic warning for the following:

- Behavior – meet only with _____ teacher to discuss ways of improving.
- Attendance – see number 4 below... students must attend school regularly.

To complete the probation period, your student must comply with the following supportive measures and requirements:

1. Have agenda book signed *each* Friday by each academic teacher documenting they have correctly completed their agenda, turned their work in, and have met classroom behavior expectations that week.
2. Attend at least 2 help sessions with the teachers of core classes to discuss ways to improve behavior in classes.
3. Improve citizenship scores to a 3 or higher and not receive additional behavior referrals.
4. Attend school in compliance with state and district policy. If absent, send parent letter or doctor note to excuse.

SUBJECT	DATES OF ATTENDED HELP SESSIONS WITH TEACHER INITIALS				TEACHER SIGNATURE
MATH					
LANGUAGE ARTS					
SOCIAL STUDIES					
SCIENCE					
ELECTIVE					

This signed letter should be placed in your child’s agenda book so students can make the appropriate appointments with teachers. The completed form will be turned in to the homeroom teacher or Mrs. Curry at the end of the Probation period. Your child’s instructional team and our Guidance Office are here to provide you and your student with any assistance and direction you may need to help your child meet their full potential. If you have any concerns or questions, please contact Page Curry, Program Coordinator, or Matt Roberson, Assistant Principal Cobb Curriculum Services, at 488-3364.

Failure to complete these measures may revoke your child’s magnet and school reassignment status.

Student Name: _____

Parent Name: _____

Student Signature: _____

Parent Signature: _____

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