

**Alliance for Academic Excellence
VPSC** Program
Us Department of Education
2011**

I certify that the information provided on the Armada Middle Academy of Arts and Sciences application form is accurate. I give my permission for school officials to report my child's achievement and aptitude test scores when required. I understand that this and other information will be maintained in confidence by Armada Middle Academy of Arts and Sciences Administration and that applications will not be returned to parents. I further understand that by submitting this application my student will be participating in a federally funded program that is an ongoing study designed to improve student achievement within our school systems. As such, I further recognize that by submitting this application, my child's academic and socio-economic information will be available (through the Alliance for Academic Excellence) to the US Department of Education for data to ascertain the effectiveness of this program.

Student Name: _____

Parent Signature: _____

Date: _____

Please return this form along with your child's application. If you have any questions, feel free to call the Alliance for Academic Excellence grant coordinator at (586) 784-2185.

** Voluntary Public School of Choice