Early Outreach Program
Code of Conduct Form

Note to Student:
I, _____________________________ have read the **EOP Code of Conduct** which
explains the student behavior policies to be followed during all phases of the EOP. I
agree to comply with the stated conditions and fully understand that non-compliance on
my part will result in penalties, fines or in my suspension and/or dismissal from the Early
Outreach Program @ ISU.

Student Signature____________________________ Date__________________

Note to Parent:
I, the parent/guardian of ______________________________ have read the **EOP Code of Conduct** and the **EOP Dismissal Policy**, which explains the student behavior policies
to be followed during all phases of the EOP. I fully understand what is expected of my
child. I realize that my son’s/daughter’s/ward’s non-compliance to any of these
conditions may result in penalties, fines or in his/her suspension and/or dismissal from
the Early Outreach Program.

Signature of Parent/Guardian__________________________ Date__________________

Please sign, date, and return to:
EOP Iowa State University, 357 Carver Hall, Ames, IA 50011-2060, BEFORE March 20, 2009