



BISHOP FENWICK

Request for Fully Virtual/Remote Learning Updated December 1, 2020

Student Last Name

Student First Name

Year of Graduation

During the COVID-19 pandemic, we recognize that for a variety of health, safety, personal, and family reasons, students may seek an entirely online educational experience. We understand these requests and we support our students and parents/caregivers in seeking the most appropriate education model during this challenging time. Furthermore, we appreciate that these requests may be for a period of weeks or months, depending on the particular situation and circumstance. We respectfully ask that in order for students to go “fully remote” for more than two weeks, the student’s parent or guardian complete this form.

By requesting an entirely online experience with all virtual classes, the student and family agree to the following:

- Participation in all courses, instruction, and support will be online exclusively for the period of time requested by the family; this period of time must be at least two weeks
- Students are fully responsible for following the guidelines and expectations for remote/virtual learning, which will be outlined in our “Online Etiquette” addendum to the *Student Handbook*
- Students must stay current with all classes, assignments, readings, and assessments, recognizing that this accommodation may require alternate formats for some work
- This request for virtual/remote learning may be extended through completion of the second trimester, which ends on Friday, March 5, by an email communication to our Principal, Ms. Marquez
- On a case-by-case basis, in consultation with the student, family, school administration, and appropriate medical experts, the student may participate in-person in after-school activities, clubs, and sports on campus

In the space provided (attach a separate document if necessary), please describe the reason(s) for requesting Virtual/Remote Learning. **Please return this form to the Principal’s Office at least two days prior to the first “fully remote” day requested for the student.**

Student Signature

Date

Parent/Caregiver Signature

Date

Guidance Counselor Signature

Date

School Nurse Signature

Date

Principal Signature

Date