



ONLINE CLASS ENROLLMENT FORM 2023/2024

APPLICANT INFORMATION		
Student Name:	Building: AHS	
Date of Birth:	Grade level:	
Address:		
City:	State:	Zip:
Student Email:		
COURSE INFORMATION		
2023/2024 School Year	Semester: <input type="checkbox"/> 1 st or <input type="checkbox"/> 2 nd	
Subject:	Course Title:	
Offered by:	This course will be in lieu of:	
PARENT INFORMATION		
Parent Name:	Phone:	
Parent Email:		
Parent Signature:	Date:	

FOR OFFICE USE ONLY	
Date Received:	Course Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No
Course Title and Provider Name:	
Placement Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Student Mentor:
Student Enrolled: <input type="checkbox"/> Yes <input type="checkbox"/> No	Final Course Grade:



Section 21f Student Contract

(To be completed with student, parent and counselor/principal)

Student Name

Grade

Parent/Guardian Name

The best way to reach me is: Email _____

Phone _____

Student:

- I agree to keep up with assignments, test and quizzes.
- I agree to communicate with my instructor/mentor regularly and whenever I have a problem.
- I agree to communicate regularly with my mentor and whenever I have a problem.

Parent:

- My child has access to a computer with Internet connection at home.
- I can arrange for my child to have regular access to a computer with Internet connection at the local library, community center or other location.
- I agree to support my student's success in online learning by:
 - Setting up a study space
 - Monitoring his/her progress
- Helping maintain his/her study schedule
- Encouraging him/her to communicate with the mentor and instructor.
- I want my child to participate in online learning as part of my child's school day.

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Attendance: Virtual Learning Students

I agree to maintain two-way communication with my assigned mentor teacher on the designated state pupil accounting days. I agree to be present in class on all days my mentor requires me to be present.

I agree to log on state pupil accounting day and an additional 10 days of the count periods.

I agree to initiate contact via phone, email, text, or other social media once per week with my assigned mentor teacher. I agree to respond to contacts initiated by my mentor teacher. I am not required to complete a weekly contact during school breaks (for example, winter break and spring break).

I understand that failure to abide by these requirements may result in loss of my online privileges and/or payment of my courses.

Actual Attendance is determined as follows:

- Through logging into each course.
- Through two-way communication with the assigned mentor teacher (i.e. meet-ups, phone conversations, etc.).
- Through attending all required weekly face-to-face class periods.
- Completing 5 hours of coursework per class, per week (total of 25 hours). This is measured from Wednesday at 12:01 a.m. to Tuesday at 11:59 p.m.
- Showing a forward progress, according to the pacing chart, in the online classes.

I understand that if I do not abide by the above attendance policy, I am subject to the following process (not necessarily in this order):

- Student will be placed on Academic Warning/Probation and the mentor teacher will formally contact my parent/legal guardian with concerns via phone, email, and/or written letter.
- An action plan will be put into place. A meeting between my parent/guardian, the mentor teacher, and myself will occur to require physical attendance at school of 3 hours each week per class.
- The supervisor of the program will contact my parent/legal guardian and will require additional hours of physical attendance at school.
- If I am a minor student, the district will make the necessary referrals to the Southgate Police Department and/or the Wayne County Juvenile Court system regarding truancy and educational neglect.
- If I am inactive for 10 consecutive school days, the district will drop me from the program.

Final Examination

I understand that final exams for all virtual courses are required to be taken at the resident district. Finals must be taken face to face. I can use any notes I have written down or printed off. I must pass the final with a score of 60% or higher to pass the course.

*****Note: Typing your name will serve as a replacement for your physical signature*****

We acknowledge that we have reviewed this agreement together and understand our responsibilities.

Student

Date _____

Parent

Date _____

School Representative
Southgate Anderson

Date _____