$\begin{array}{c} \hbox{Innovation Academy High School} \\ \hbox{Off-Campus Contract for FVS and GAVS Virtual Courses} \\ \hbox{2024-2025} \end{array}$

Students with 1st or 8th period virtual courses n parent/guardia	may elect to be off cam an permission.	pus during th	at time, wi	th
Student Name (print):	Grade:	Counselor:		
Student Email:	Parent Email:	•		
Please check which period(s) you will be off-campus for				
	Please list if you a additional virtual		tor any	
1st & 2nd 7th & 8th	additional virtual	perious		
Both Sides of this form must be completed by the stude to Ms. Danner or Ms. I			ial/sign an	d return
			Student Initials	Parent Initials
I understand that online courses require students to be independently in order to be successful in the course.	self-disciplined and to	o work		
I understand that the student is responsible for following and keeping up with the online course syllabus and pacing guide as provided by the online teacher.				
I understand that the student's standing will be evaluated				
I understand that both student and parent/guardian wi see their current standing in virtual lab and/or for gene				
I understand and agree that the student must be in goo campus privileges.	d standing in order to	keep off-		
I understand that a student that "needs improvement" and be required to attend their virtual period in the des	•			
I understand that internships, jobs, and extracurricular maintaining the virtual privilege and are not excused al when you are not in good standing.	-			
I understand that because of liability issues, students w NOT ride the bus to school and then leave campus.	who have virtual lab 1s	st period may		
I understand that because of liability issues, students w NOT leave campus and return to ride the bus home.	vho have virtual lab 8	th period may		

I understand that stud	-		rirtual labs at the end of the				
I understand that stud	lents with 1st period	virtual lab must n	ot be late to 2nd period.				
1st and 8th period. 2n	nd and 7th students do , you will need a paren	o not have that pr	late rules apply for ONLY ivilege. If you arrive late or not be excused unless for a				
I understand that I mu	ust obtain an Off-Cam	npus Pass in order	to leave early or arrive late.				
I understand that the Administration's discr		y be revoked if not	in good standing or at IA's				
Parent/Guardian and Student signatures below indicate that I am releasing Fulton County Schools of any responsibility for the student choosing to be off campus for their virtual period and indicate agreement to the conditions set forth by Innovation Academy High School.							
Student Signature:			Date:				
Parent Signature:			Date:				
Sports Related Arriva		_	rly to participate in a sport a rmation:	t your distri	cted		
Districted Home School	ol:			_			
Sport:				_			
Season:	Fall	Winter	Spring	-			
Coach's Name:				_			
Coach's Signature:				_			
Coach's Email Address	s:			_			