Mercer Island School District 2024 F

Student Request for Online Course

Mercer Island School District maintains high expectations for its academic program. Graduation requirements are established to provide each student with the best possible educational experience and to meet district and state standards. Not all students have the same needs, nor do all students benefit from identical learning experiences. Therefore, MIHS students who complete courses through MIOnline (MISD's Online Learning Program), where they may take courses that meet the same academic standard as courses offered at MIHS may receive credit if they meet the following criteria:

MIOnline Course

1) Meet with assigned MIHS counselor to discuss course options and how the potential requested online course (provided through MIOnline) aligns with the student's High School and Beyond Plan.
    a. Only District-selected, OSPI-approved online providers are allowed. *(See MIOnline webpage)*
    b. In order for a student to receive credit on their transcript for an online course, the course must be taken through MISD's MIOnline.
    c. Online courses count towards a student's 7-period course maximum per semester.
2) Submit a completed request form and receive approval from the MIHS principal in writing prior to enrolling in the course.
3) Complete all requirements outlined for successful completion of a MIOnline course (detailed at the time of course registration) by the semester deadline(s).

Date _____

Student Name: _____ Graduation Year:_____

Student Email:_____ Student Phone: _____

Are you a nonresident/choice transfer student? ◯ Yes ◯ No

Do you have: ◯ 504 ◯ IEP ◯ Both ◯ Neither

Parent/Guardian Name:_____

Parent/Guardian Email:_____Phone: _____

Requested Course: _____

Which part of the Course are you requesting to take:	**During what part of the school year:**
◯ 1st Half of Course (A) ◯ 2nd Half of Course (B) ◯ Full Year of Course (A/B) ◯ Course is only Semester-long	◯ Semester 1 ◯ Semester 2 ◯ Full Year
Period Requested for MI Online Mentor (must select one): ◯ 1 ◯ 2 ◯ 3 ◯ 4 ◯ 5 ◯ 6 ◯ 7	
Reason for Requesting Off-Campus Credit (check one): ◯ Preferred Learning Style ◯ Course Not Offered MIHS ◯ Schedule Conflict ◯ Credit Retrieval (for previously failed course) ◯ Other (must provide details): _____ _____	

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Date Request Received: _____ By Whom: _____

MIHS Counselor Acknowledgement: _____Date _____

Student Eligible to Request: Y / N Reason, if No: _____

MIHS Principal: _____Date _____

Approved _____Denied _____ Reason for Denial:_____

10/3/25 AT

***Appeals**: Must be submitted to the MISD Superintendent in writing within 10 calendar days of notification of denial. The Superintendent will arrange a meeting to discuss the issue and provide a written decision within five calendar days following the meeting. The decision of the Superintendent is final.*