Cherokee County School District

Home Study Part-time Enrollment Participation Acknowledgement for Middle School and High School

The Cherokee County School District (CCSD) recognizes the need for home study students to be offered support services and afforded the opportunity to participate in designated school activities as a vehicle to develop and enhance their educational experience, as well as for social and community relations. In accordance with Senate Bill 42: "The Dexter Mosley" Act, a home school student may enroll in a qualifying course at his/her designated school within the attendance area of the student's custodial parent's primary residence and participate in extracurricular or interscholastic activities.

This CCSD Home Study Part-time Enrollment Participation Acknowledgment Form (MS/HS) should be completed and returned to the Supervisor of Student Athletics and Activities Office. Forms may be sent via email to Chris.Wallace@cherokeek12.net.

Demographic Information

Student Name:_____ Parent Name: _____

Home School Curriculum:_____ Home School Entry Date: _____

CCSD School of Residence:_____ 9th Grade Entry Date: _____

Permanent Address:_____ City:_____ Zip: _____

Phone/Contacts: (1)_____ (2) _____

Sports/Activities: _____

Enrollment Acknowledgement

- I understand my student must be registered, and this acknowledgement must be submitted to the school of residence 30 calendar days prior to the first school day of the semester in which my home study student will enroll in a qualifying course.
- I understand my student must maintain enrollment in at least one CCSD course per semester to remain eligible for athletics and all other extracurricular and interscholastic activities.
- I understand my student must adhere to attendance requirements per CCSD Student/Parent Handbook.
- I understand my student must be enrolled in a combination of courses that carry at least 2.5 units per semester in order to be eligible for participation.
- I understand my student must meet the same eligibility requirements as full-time public-school students (accumulated units, units passed previous semester, etc.).
- I understand my student must reside in the attendance area of his/her custodial parent's primary residence.
- I understand my student is ineligible for CCSD Reassignment consideration and to still participate in extracurricular activities.
- I understand my student must follow the CCSD Code of Conduct.
- I understand withdrawal of my student from CCSD to home school full-time will result in the loss of eligibility for one calendar year for all activities.
- I understand my student is ineligible to participate in the CCSD graduation.

Parent Signature: _____ Date: _____

Reviewed By: _____Date:_____ Status (Approved/Denied):_____