SKYLINE HIGH SCHOOL ONLINE LEARNING AGREEMENT

Student Name:		
Birth Date:		
Grade Level:	-	
Student Email:		
Does student have an IEP? (circle one)	Yes	No
Does student have a 504? (circle one)	Yes	No
Parent/Guardian Name:		
Parent/Guardian Phone Number:()	
Parent/Guardian Email:		
Parent/Guardian Address:		

Please complete the information below as a part of the enrollment process.

Online Handbook Agreement

The Skyline High School Student Handbook and Online Course Handbook Policy is a vital part of our program. Though the handbook does not contain every specific rule or regulation concerning the program, it does have all major policies and general information to help students and their parents better understand this unique program. Please read the handbook carefully. The administration will make any program decisions that are not covered in the handbook.

Please explain below why you are interested in your child enrolling in a virtual course:

Please list the online course(s) in which the student	wishes to enroll:	
1)		
2)		
3)		
*4)		
*5)		
*6)		
*7)		
* First time online course students should select 1-3 co	ourses unless approved otherwise by the	ne principal.
The signature below indicates that we have receive student handbook and understand that it is our responsible to the handbook.		
Student Signature	Date	
Student Name (Printed)		
Parent Signature	Date	
Parent Name (Printed)		
APPROVAL SIGNATURE:		
Principal Signature	 	