



Parent Request to Enroll in Online Learning Through MOCAP

Directions:

1. Parent/Guardian must complete the front and back of this form and take it to your student's school counselor.
2. We encourage you to go to <https://mocap.mo.gov/about.html> to see the guidelines set up by The Missouri Department of Elementary and Secondary Education and view the course catalogs.

General Information:

Date: _____ Semester for Enrollment: _____

Student's Name: _____

Parent's Name: _____

Phone Number: _____

Please circle the appropriate answer

1. My student has attended a Missouri public school or public charter school for at least one full semester immediately prior to the request. This is required to be able to be considered and enrolled in the MOCAP option. **Y or N**
2. My student resides in the district AND is enrolled as a full-time student in the district. This is required to be able to be considered and enrolled in the MOCAP option. **Y or N**
3. Does your student have a 504 or IEP? **Y or N**
4. Does your student receive English Language Services? **Y or N**
5. Is your student currently being evaluated for eligibility as a student with a disability?
Y or N
6. Why is the MOCAP option appropriate for your student? _____

7. Which MOCAP option are you interested in applying for? _____
(See above Website for your options)



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Parent--please initial ALL of the following to indicate that you have read and understand them.

_____ I understand that Marshall Public Schools (MPS) is not required to provide access to computers, the Internet or other necessary technology resources to students choosing to take a MOCAP course.;

_____ I understand that MPS is not required to provide a supervised location for student taking a MOCAP course to work on their course during the school day;

_____ I understand that all MPS Distance Learning courses, including MOCAP courses, follow the same school calendar as in-seat courses. Students enrolled in MOCAP courses are expected to complete all course requirements by the end of the semester as stated on the MPS Board of Education Approved calendar;

_____ I understand that all classes will receive a letter grade, but they will not count towards class rank (valedictorian/salutatorian);

_____ I understand that students who enroll in MOCAP courses are expected to actively participate in those courses with the goal of completing the course. If a student does not actively participate in a course or is not successful in the course, the district may remove the student from the MOCAP course and refuse to enroll the student in a MOCAP course(s) in the future;

_____ I understand that Marshall Public Schools will monitor my students progress on a monthly basis and advise if the student is not meeting the academic standards for the course and will notify the parent that their student will no longer be eligible for the MOCAP program at the district's expense;

_____ I understand that MPS will gather a school based (district level if required) team to decide if the requested MOCAP placement is the best educational environment for the student;

_____ I understand that in order to be successful in an online course, a student must have good computer skills, time management skills, persistence, and good written communication skills;

_____ I understand that by enrolling in the MOCAP course, the virtual provider, not Marshall Public Schools, will monitor and provide accommodations specified for my students IEP or 504 plan and or EL support; however, prior to MOCAP enrollment, an IEP or 504 meeting will take place for those students who are currently receiving services from the public school.

_____ I understand that I am responsible for understanding how my educational choices, including my decision to take MOCAP courses, may impact my student's MSHSAA eligibility.



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Additional Information:

1. If this course is offered onsite by MPS are there extenuating circumstances that make it difficult or impossible for the student to take the onsite course offered by the district?

2. If this course is offered onsite by MPS and the student is able to take that course, what are the reasons the student wants to take the course through MOCAP?

3. If the course is offered online by the district and the student is able to take that course, what are the reasons the student wants to take the course through MOCAP?

Course/Courses Requested:

Name of Requested Online Course (if elem K-5, just list elementary)	Number of credits applicable	MOCAP Course Provider

Please indicate the reason for requesting MOCAP learning:

_____ The course is not offered at my child's school

_____ There is a scheduling conflict

_____ Other: (Please describe) _____

Parent/Guardian Signature _____ Date _____