



Clare Public Schools  
 201 E. State St.  
 Clare, MI 48617  
 989.386.9945  
[www.clare.k12.mi.us](http://www.clare.k12.mi.us)

## Online Course Enrollment Request

Student Name: \_\_\_\_\_ Student Grade in Fall 2021: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

Student would like to enroll in the following course(s):

- |          |          |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ |          |

**\* Completed Online Learning Agreement must be attached to this form.**

Does student have an IEP? \_\_\_\_\_ Yes \_\_\_\_\_ No

Does student have a 504 plan? \_\_\_\_\_ Yes \_\_\_\_\_ No

Why are you requesting to take online course(s)?

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Virtual learning is a very independent learning method which requires initiative and motivation. Describe how you will manage this learning situation.

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\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Parent Consent Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date

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 \* *Your typed name on this document will constitute a signature*

**Official School Response – For Counselor and Administrator Use Only**

Student's request to enroll in the course(s) listed above has been:

\_\_\_\_\_ Accepted                      \_\_\_\_\_ Denied (reasons cited below)

- Online Course Agreement was not attached to the form.
- Student already earned credits for the course(s) so the student would be repeating a course.
- The online course(s) would not generate credits for the student's transcript.
- Enrollment in the online course(s) is not consistent with student's graduation requirements or with the student's career interests.
- Student does not have the prerequisite knowledge or skills for the course(s).
- Student has failed a previous online course in the same subject.
- Online course(s) are of insufficient quality or rigor.
- Cost of the course exceeds what the school receives in foundation allowance.
- Request to enroll was made outside the established time for enrollment and schedule changes.
- Other: \_\_\_\_\_

\_\_\_\_\_  
Counselor Signature

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



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## Online Learning Agreement

*The purpose of this agreement is to acknowledge acceptance of the identified roles and responsibilities for students and parents that request to enroll in online courses.*

Student Name: \_\_\_\_\_ Student Grade in Fall 2021: \_\_\_\_\_

Student Email: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_

A parent meeting may be required as part of the approval process.

By signing this agreement, **student agrees** to do all of the following:

- Maintain a study schedule and spend at least 5 hours a week on each online course.
- Keep up with assignments, tests, quizzes, and communication with the online coordinator;
- Communicate with course instructor(s) regularly;
- Contact the course instructor if/when questions and concerns arise as it relates to content/curriculum;

By signing this agreement, **student recognizes** all of the following:

- Clare Public Schools does not teach this course and therefore cannot provide support as it relates to content/curriculum;
- Lack of follow-through with these requirements may result in course failure(s) and/or being dropped from the course(s).

By signing this agreement, **parent/guardian** agrees with all of the following:

- My child has access to a computer with internet connection at home;
- I will fully support my child's online learning success by providing a designated study space, monitoring progress, helping maintain a study schedule, and encouraging communication with the online instructor(s) with questions and concerns.

We acknowledge that we have reviewed this agreement together and understand our responsibilities.

\_\_\_\_\_  
Student Signature of Agreement

\_\_\_\_\_  
Parent Signature of Agreement

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

*\* Your typed name on this document will constitute a signature*