

Chesapeake Public Schools
Division of Teaching and Learning
Request for 2020-2021 CPS Online Courses

Student Name

Student ID#

Date of Birth

School

Grade Level

Student Email Address

@k12cpschools.com (must use CPS email address)

Parent/Guardian Name(s)

Parent/Guardian Email Address

Parent/Guardian Phone number

In order to enroll in a CPS online course students & parents/guardians agree to the following:

- Students are responsible for having reliable computer and internet access. A mobile device is not sufficient.
- Students and parents agree to check email regularly and respond to teacher messages within 24 hours.
- Students must complete all required Virginia Department of Education tests at their zoned school.
- Courses are not self-paced and students are expected to complete a certain number of assignments each week.
- After 15 days of inactivity a student may be removed from a course in which they are enrolled.
- Students will receive orientation and login information via their CPS email account on the first day of the semester.

Student Signature

Date

Parent Signature

Date

Indicate requested course(s) & semester(s) below:

Fall Semester Courses

English 10 or Honors English 10
English 11 or Honors English 11
AP Economics (full year)*
Economics & Personal Finance*
Health & PE 9*
Health & PE 10 (not including driver's ed)*
Oceanography
VA & US Government or Honors VA & US Government
World History I or Honors World History I

Spring Semester Courses

English 9 or Honors English 9
English 12 or Honors English 12
AP Economics (full year)*
Economics & Personal Finance*
Health & PE 9*
Health & PE 10 (not including driver's ed)*
Oceanography
VA & US Government or Honors VA & US Government
VA & US History or Honors VA & US History
World History II or Honors World History II

*Please sign additional documents on the following pages

To Be Completed by the Student & Signed by the Parent:

1. Navigate to <https://forms.gle/uuLN3xZ8m5zkiuXb7> and complete the "Online Learning Readiness Diagnostic"
2. Enter your score from the "Online Learning Readiness Diagnostic"
3. Why do you want to take an online course?
4. Where will you complete your online course work?
5. How much time can you devote on a daily or weekly basis to complete an online course?
6. Do you agree to abide by the Virtual Instruction Program Honor Code as stated below?

My work is my own and no other's. I will not copy another student's answers, use or access another student's account, plagiarize from any source, violate copyright laws, nor submit any work that is not completely my own. Giving away my work, my password, or giving any access to my work to anyone also violates the VIP Honor Code.

YES NO

7. Do you have access to a desktop or laptop computer outside of school?

YES NO

8. Do you have access to the Internet/Wi-Fi outside of school?

YES NO

Student Signature

Parent Signature

To be completed by the school counselor:

I have reviewed the student information provided herein and confirm it is accurate. I confirm the course(s) the student has requested is an appropriate placement based on the student's academic history, needs, and course prerequisites.

Counselor Name

Date

Counselor Signature

Permission to Participate in a CPS Online Course

STUDENT NAME:

STUDENT ID NUMBER:

DATE OF BIRTH:

I have received, read and fully understand the Acceptable Telecommunications and Internet Use Policy for Students. By signing below all students, parents and/or guardians also are agreeing that they understand that any violation of the policy may result in the student's access to the Network being suspended and/or terminated and that disciplinary action and/or appropriate legal action may be taken. The students, parents and/or guardians understand that Network access is a privilege as opposed to a right and may be terminated at any time. The student, parent and/or guardian further understand that this access is designed for education purposes and that CPS has taken reasonable precautions to eliminate Network use for non-educational purposes. The student, parent and/or guardian also recognizes, however, that it is impossible for CPS to restrict access to all controversial or inappropriate materials, and the student, parent and/or guardian will not hold CPS, the School Board, or any individuals employed by CPS responsible for damages related to the student's use of the Network or for material reviewed by any student on the Network.

I also understand that termination of Network privileges could result in the student being unable to complete and receive credit for the E-Learning course in which they are enrolled.

STUDENT SIGNATURE:

DATE:

PARENT/GUARDIAN NAME:

PARENT/GUARDIAN SIGNATURE:

DATE:

PARENT/GUARDIAN:

As the parent or guardian of the above named child, I understand that Network access includes a Chesapeake Public Schools (CPS) Desire2Learn account.

Furthermore, I give permission for my child to take this course completely online. I understand that course sessions will be available anytime anywhere and that it is my responsibility to provide reliable computer and Internet access. I understand it will be my child's responsibility to schedule his/her time wisely in order to successfully complete this course. By signing this form, I release Chesapeake Public Schools, the School Board, and any individual employed by CPS from any obligations, legal or financial that could result from my child's use of online technology.

PARENT/GUARDIAN SIGNATURE:

DATE:

Please complete this form if you are requesting Economics and Personal Finance or AP Economics

Dear Parent/Guardian:

As a student taking **Economics and Personal Finance - 70917**, your child will be offered a state-approved industry certification, **WISE Financial Literacy**, at the completion of this course. The testing entity requires student information at the time of registration. The information is released to the specific testing entity, **WISE Financial Literacy, 227 East 56th Street, Suite 201, New York, NY 10022**, and will not be shared otherwise. Signing this document indicates that you are aware that your child will be taking an industry credential upon successful progression in the course and that required student information, to include student directory information and as needed driver's license information, state issued ID card information, student state testing number, or special education accommodations to complete the test registration. All credentials that are passed will be recorded on the student's academic transcript.

Student Name (Print):

Parent Name (Print):

Parent Signature: _____ Date: _____

Please complete this form if you are requesting Health & PE 9 or Health & PE 10

Students who enroll in online Health & PE courses will be required to complete both the health and PE portions of the course in order to earn a Health & PE credit. The health portion is completed entirely online while the PE portion requires students to participate in a minimum of 65 hours of documented physical activity.

In order to enroll in an online Health & PE course students and parents/guardians agree to the following:

- Students must attend 2-3 in person meetings for physical fitness testing as well as CPR, First Aid and AED training. Transportation to and from the meeting is the responsibility of the student. Non-attendance may result in a failing grade for the course or removal from the course.
- Students must keep a log of physical fitness activities and submit it to their teacher on a weekly basis.
- Physical fitness activities must occur for the entire duration of the course. Students who complete 65 hours prior to the official end date for the course are required to continue to submit hours through the end of the semester.
- Physical fitness hours can be earned through a variety of activities including team sports, group fitness classes, and individual workouts.
- Students enrolled in Health & PE 10 will not receive any driver's education instruction. Students are responsible for obtaining their own driver's education instruction at their own cost and time.

Student Name (Print):

Student Signature:

Parent Name (Print):

Parent Signature: