Lapeer Community Schools – Full Time Virtual Online Enrollment Application

Student Name:	Student Name:		Grade:	
Student E-mail	Address:			
Parent E-mail	Address:			
 I under complete in the complete in t	rstand that I will receive 1 eted. rstand that by enrolling in check in with daily for attestand that I will have the stand that I will have the standard	delines regarding online co credit for each semester of can an online course, I will be as endance and support. semester to complete the onlused to satisfy NCAA Clear	online course work ssigned a mentor with tine course.	
Course(s) of Study:			1 2	Semester/Hr F W □ □
Credit Recovery:	Yes No		$\begin{bmatrix} 2\\3\\4 \end{bmatrix}$	
Reason for On-line Cou			5 6	
	Student Signature		Date	
Parent/Guardian S	ignature (Indicates consent for virtu	nal course being taken)	Date	
OFFICE USE ONLY The information listed related to requirements.	the online course being taken and Po	owerSchool information is accurate by	the student and meets the st	udent's educational
Affirm	Counselor's Signature	<u></u>	Date	
I underI will rprior torelated	rstand that the student will maintain a log related to co o receiving payment as the to the students attendance	ng guidelines for mentoring receive 1 credit for the sementact hours of support as the mentor. I will also maintain in PowerSchool.	ester of online cours e mentor and submit n accurate attendance	that log e records
Staff Member	r Name	Signature	D	ate
OFFICE USE ONLY I have assigned the above stated	mentor to meet the needs of the stu-	dent based on the students course selec	ction and mentor availability	,