Online Learning Agreement

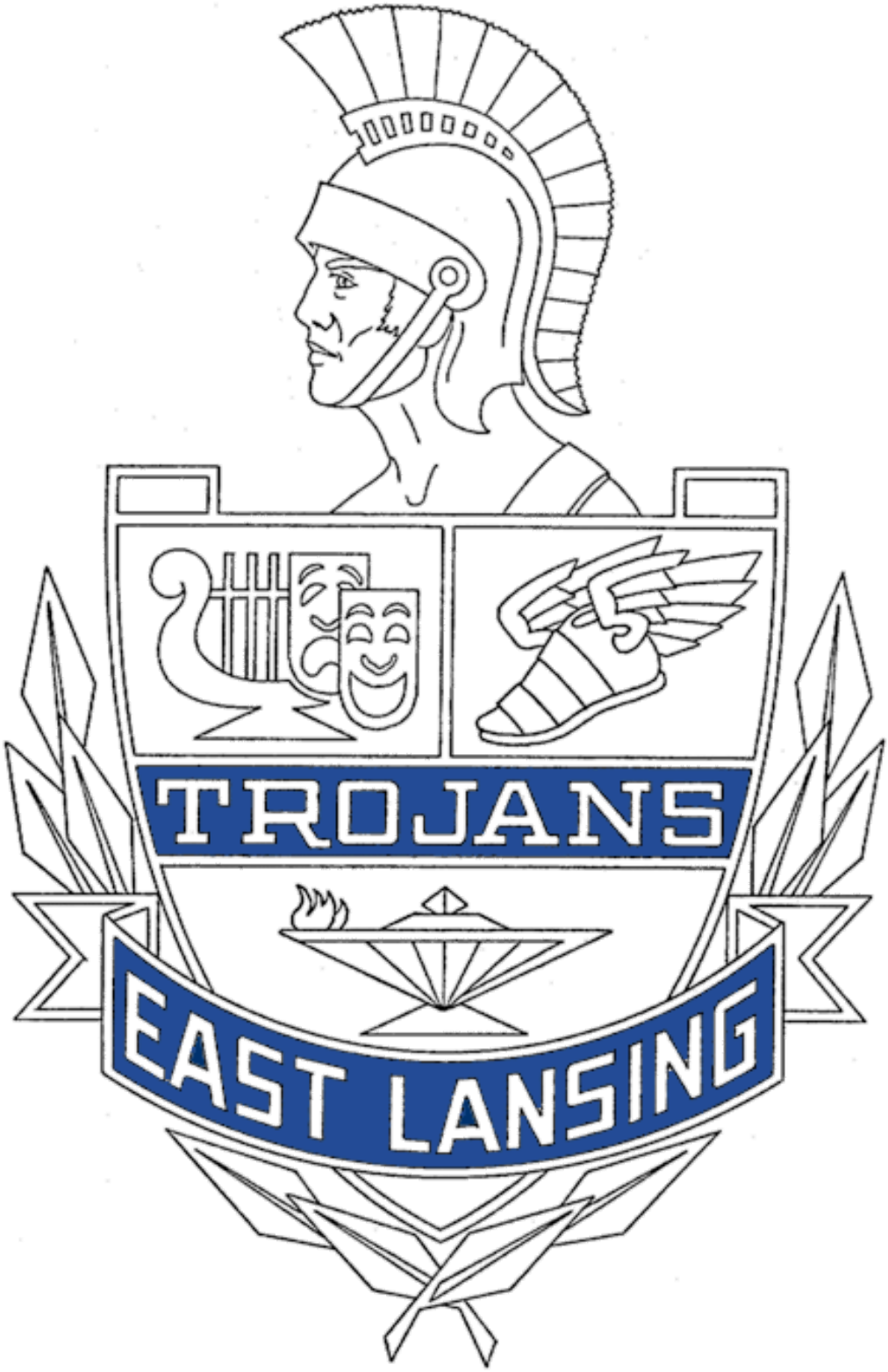
Students have the option of enrolling in online courses. Online courses offer a variety of subjects taught by certified Michigan teachers. Students must be self-motivated and able to participate online. On-site enrollment will be provided by the virtual high school site coordinator. Course information for all virtual courses is available at: https://micourses.org/courses/?provider=michigan-virtual. Please choose the Statewide Catalog for courses students may take. A course percentage will be given by the VHS instructor and converted to a letter grade by the mentor. Once approved, all enrollment is handled through the Student Services office.

Additionally:

- I understand that the mentor is not the teacher of record. The mentor's role is to help trouble shoot issues, arrange for proctored tests and/or exams, report final grades to the registrar, and maintain attendance records as required by the State of Michigan.
- I understand students must check in with their mentor teacher during the state pupil accounting window. The mentor will inform students of these dates.
- I understand that students need to be independent learners. They will need to follow the course pacing guide, read course documents, use available resources through MiVHS to navigate the course, and engage with their virtual instructor.
- I understand that the request MUST align with the student's Educational Development Plan (EDP) for grades 8 through 12.
- I understand that students must possess basic knowledge and skills in technology to be successful in an online course.
- I understand this application will be denied if the student demonstrated failure in a previous online course.
- I understand that in order for the cost of a student's online course to be covered, the course must be taken as part of their six period schedule.
- I understand that each student will be limited to two (2) online courses as part of their schedule each semester.
- I understand that there are limited class sizes each hour for MiVHS and I may not be able to take my VHS class the hour I request.
- I understand that the student has off-campus privileges for MiVHS hour(s).

Please be advised that it is the responsibility of the student or family to ensure full payment of any fees associated with a course that is dropped after the reimbursement deadline. Additionally, classes may not be added or dropped after the first week of the semester in which the course is taken.

Please complete and sign the application and EDP. The application cannot be processed if either of these forms is missing or unsigned.


TROJANS
EAST LANSING

East Lansing Public Schools
Online Learning Application
School Year:_____ Student Name:_____ Grade:_____

This section to be completed by the student

Online Semester 1:

#1: Course title from catalog:_____
Class to drop/preferred hour:_____
#2: Course title from catalog:_____
Class to drop/preferred hour:_____

Online Semester 2:

#1: Course title from catalog:_____
Class to drop/preferred hour:_____
#2: Course title from catalog:_____
Class to drop/preferred hour:_____

Student Signature:_____ Date:_____

This section to be completed by the Parent/Guardian

Parent/Guardian Name (print):_____

- ☐ I understand that the student/family is responsible for providing full payment to ELPS for associated fees of a course that is dropped after the reimbursement date. Classes will not be added or dropped after the first week of the semester when the course is taken.
- ☐ I understand that the ELHS online mentor's role is to troubleshoot issues, provide student support, communicate progress, request extensions, proctor exams, report final grades, maintain attendance records required by the State of Michigan, and is **not** the teacher of record
- ☐ I understand that both guardians (if in PowerSchool) will be included in all course communication. If the second guardian would like, they can request an account.
- ☐ I understand that repeated violations of ELHS or MV Academic Integrity Policies will result in students being withdrawn from their current courses, receiving a failing grade, and/or being prohibited from enrolling in future online courses.
- ☐ I have read the online learning agreement and agree with all statements.

Parent/Guardian Signature:_____ Date:_____

This section is to be completed by the mentor.

☐ I have met with this student

Mentor Signature:_____
Date:_____

This section is to be completed by the case manager and/or student advocate. If this does not apply to you, write "N/A" for not applicable or leave blank.

☐ I have met with this student

CM/SA Signature:_____
Date:_____

This section to be completed by the counselor

☐ Counselor approves the online course(s) for this student.

☐ Counselor cannot support the online course(s) for this/these reasons_____
_____

Counselor Signature:_____ Date:_____

Educational Development Plan

Name: _____ Graduation Date: _____

Post High School Plans:

Career Goals:

Four Year Planning Template – record plans in pencil so that changes may be made

9th Grade	
1st Sem	**2nd Sem**

10th Grade	
1st Sem	**2nd Sem**

11th Grade	
1st Sem	**2nd Sem**

12th Grade	
1st Sem	**2nd Sem**

Your Educational Development Plan **MUST** include:

☐ English (4)

☐ Math (4)

☐ Social Studies (3)

☐ Science (3)

☐ PE/Health (.5 each)

☐ World Language (2)

☐ Visual/Performing/ Applied Arts (1)

☐ Electives

☐ **TOTAL CREDITS (22)**