

Request for Online Class

Student Name / Grade		Student ID (SID) #	
Parent's Phone Number		Student's Phone Number	
Online Class Period	MM / DD / YYYY ~	MM / DD / YYYY	

I, <u>(Student's Name)</u>, understand that I will be required to submit my assignments on time. I also understand that I will be required to take all tests/quizzes while I am taking classes online.

Student Sign	Date
Parent Sign	Date