

APPLICATION TO ATTEND e-Learning Spruce Creek High

Name: _____ ID 1 Birth Date: ___ / ___ / ___ Age: _____

Address: _____

Student Cell: _____ Student Email: _____

Legal guardian(s): _____ Phone: _____

Guardian Email: _____

With whom do you live? _____ Relationship: _____

Have you taken courses in any of the following formats: Volusia Virtual (VOL) Yes No

Florida Virtual (FLVS) Yes No Odyssey Yes No Other Yes No

If yes, course(s) taken _____

How will you travel to school? _____

The School District of Volusia County has developed a Dropout Prevention Program that serves students who are in need of alternative academic support. The program is designed to increase academic interest and achievement. Special features of this program include alternative teaching strategies, online, competency-based instruction, improvement of study habits, self-esteem, and personal and social responsibility.

Please sign and return to e-Learning Counselor.

_____ Yes, I give my permission for my child to be served in this program.

_____ No, I do not give my permission for my child to be served in this program.

Parent/Guardian (Student if 18 years or older)

Date

Name: _____ ID 1 _____ Date _____

e-LEARNING CONTRACT

If accepted, I agree to the following:

1. Attend school every day and be on-time
2. Pursue/complete my individual academic goals and complete requirements for high school graduation to receive a diploma from Spruce Creek High School.
3. Adhere to all items in the e-Learning contract, including all Volusia County Schools' policies and procedures.
4. Adhere to the rules of the Lab Manager and Spruce Creek High School.

Initial/ Initial

COMPUTER LAB CONTRACT

If accepted, I agree to the following:

1. Only use the program authorized by your teacher and no other programs.
2. Use the Internet ONLY for the teacher directed course work.
3. Leave personal software or games outside of the classroom.
4. Print only when given permission from the instructor
5. Leave personal items at home. Turn off personal electronic devices such as cell phones. They will be kept out of sight.
6. Bring your own headphones/earbuds.
7. Become familiar with and adhere to Volusia County Schools' Electronic Usage policy.

Initial/ Initial

AGREEMENT OF UNDERSTANDING: STUDENT CODE OF CONDUCT

1. I have read, understand and agree to follow the Volusia County Schools Code of Student Conduct and understand I can access it online at any time.
2. I have read the Volusia County Schools District-wide Dress Code Policy and agree to maintain compliance when I am in the e-Learning Program.

Initial/ Initial

GRADUATION INFORMATION

I understand that it is MY responsibility to make graduation arrangements directly with Spruce Creek High School. In addition, I understand that my participation in activities such as Prom and Homecoming is at the discretion and approval of my zoned school.

Initial/ Initial

Student: _____ **ID: 1** _____ **Grade** _____ **Date:** _____

CODE OF STUDENT CONDUCT AND DISCIPLINE

PARENT AND STUDENT ACKNOWLEDGEMENT

This code has been developed to help your son/daughter understand his/her rights and responsibilities. Parents/guardians should take notice of the attendance section of this code.

Parent/s guardians should take special notice of those provisions of this code that could lead to your child being suspended or expelled from the School District of Volusia County.

The school is in need of your help and cooperation. When you have read and discussed this document with your son/daughter, it is requested that you sign this sheet and return it to the school. This form will be kept in your son's/daughter's cumulative folder. FAILURE TO RETURN THIS ACKNOWLEDGEMENT WILL NOT RELIEVE A STUDENT OR THE PARENT(S) /GUARDIAN(S) OF THE STUDENT FROM RESPONSIBILITY FOR KNOWLEDGE OF THE CONTENTS OF THE CODE AND WILL NOT EXCUSE NON-COMPLIANCE BY THE STUDENT WITH THE PROVISIONS OF THE CODE.

SCHOOL BOARD POLICY AS DESCRIBED IN THE CODE PROHIBITS STUDENTS FROM BRINGING ILLEGAL DRUGS AND DANGEROUS WEAPONS AND/OR FROM COMMITTING VIOLENCE AGAINST PERSONS OR PROPERTY ON SCHOOL GROUNDS OR AT SCHOOL SPONSORED FUNCTIONS. PARENTS SHOULD TAKE NOTICE THAT IF THEIR CHILD DISREGARDS THESE RULES AND BRINGS ILLEGAL DRUGS OR DANGEROUS WEAPONS OR COMMITS ACTS OF VIOLENCE AGAINST PERSON OR PROPERTY, THE POTENTIAL CONSEQUENCES COULD INVOLVE EXPULSION OF THE STUDENT FROM THE SCHOOL SYSTEM.

I have reviewed and understand the Code of Student Conduct and Discipline and know that it is available on the VCS website for further reading at any time.

Student Signature

Date

Parent/Guardian Signature

Date

Attendance and Tardy Policy

If students must be absent, they are required to call the eLearning lab each day. A phone call from a parent/guardian/self is required for the absence to be considered "excused." A doctor's note may be required. The eLearning lab phone number is _____.

If there are scheduled absences, such as an appointment, the student, parent, or guardian should notify school personnel with proper documentation.

Attendance/ Tardy

1. Parents must call daily due to report an absence or tardy.
2. Students will be placed on an attendance contract if a pattern of absences develops.
3. Failure to comply with the attendance contract will result in a conference with parent, teachers, and administration to determine student status in the program.

Front desk personnel will confirm all absences with a parent/guardian.

Signature of Student _____

Signature of Parent _____

CELL PHONE /ELECTRONIC USAGE AGREEMENT

Volusia County Schools Code of Conduct Level II Offense

All electronic devices must be turned off and put away during instructional time.

They are to be out of sight and away from immediate access. Become familiar with and adhere to Volusia County Schools' Electronic Information Services Acceptable Use Agreement.

First offense

Warning: Student warning and parent notification.

Second offense

Conference: Referred to lead teacher for a parent-student conference.

Third offense

Eligibility: Parent-student conference to discuss student eligibility for continued enrollment in eLearning program.

Student Signature _____ Date _____

Parent Signature (if applicable) _____ Date _____



Curriculum and School Improvement Services Early Graduation Request

STUDENT NAME: _____ Date: _____
 Alpha Code: _____ Date of Birth: _____
 G.P.A. _____ Age: _____

STUDENT'S SPECIFIC REASON FOR REQUEST: (Please print):

Parent's Recommendation: _____

(Documentation needs to be attached (i.e., copy of SAT/ACT scores, college letter of intent, high school transcript, Bright Futures status))

TO BE COMPLETED BY COUNSELOR:

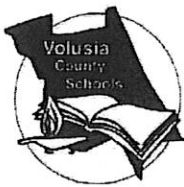
Conference Date(s): _____ Credits Completed: _____
 Graduation G.P.A.: _____ Rank in Class G.P.A.: _____
 FCAT Passed: _____ SAT/ACT Scores: _____
 Courses/Credits Needed: _____ Dual Enrollment: _____
 _____ Expected Graduation Date: _____

Counselor Comments: _____

This request will be made based on the availability of required courses. Early graduates are not eligible for Valedictorian or Salutatorian honors. If approved for early graduation, it is the responsibility of the student to maintain contact with Volusia County Schools for graduation events, supplies, etc.

Principal's Recommendation: _____

_____ Student Signature	_____ Parent Signature
_____ Counselor Signature	This foregoing instrument was acknowledged before me this _____ day of _____, _____; who produced a Florida driver's license as identification or who is personally known to me.
_____ Principal Signature	_____ Notary Signature
DATE APPROVED: _____	My commission expires: _____



DECLARATION OF GRADUATION INTENT

Student's Name *Student ID* *School*

Declare my intent to graduate under the graduation option checked below.

- 18-credit Accelerated Diploma (Flag ____)
- Scholar Designation (Flag ____)
- Superintendent's Diploma of Distinction (Flag ____)

Student's Signature

Date

Parent's Signature

Date

Counselors Signature

Date

Graduation Option Flag _____ entered by _____

Signature

Date