Online Student Course Enrollment

Basic Student Information

Student Name: Student Email: Primary Phone Number:	Parent Name: Parent Email: Secondary Phone Number	
Course Information		
What grade will you be enrolled in during the 22-23 Sch 8 th grade 9 th grade 10 th grade		^h Grade
Does your child have either of the following: IEP	504 Other (spec	ify)
Please list the online course(s) you would you like	to request:	
Fall Semester	Spring Seme	ster
1.	1.	
2.	2.	
3.	3.	
4.	4.	
5.	5.	
I understand: No online request will be processed until this form head in the last have daily access to a computer and internet be reflected on my transcript and WILL count toward drop period ends. Based on PCS Policy, drops are real last last last last last last last la	nas been signed and returned to the access to complete the course. (runderstand I will own the grade (god my GPA. No opting to not count not allowed after the first 5 days of a course and communicate with ness my class on a regular basis. ss log in information about the course first 4 days of the course or course to stay enrolled, I will automatica	not a phone data plan) ood or bad) and it WILL the course after the f classes. ny teacher about any ourse, and other course
Student Signature	Parent Signature	