

FORM IHBHE-E1: DISTANCE LEARNING STUDENT COURSE CONTRACT

Directions: Read through and initial this contract with your parent or guardian. Complete and return to your school's Learning Coach.

Student Name: _____ Date: _____

Course Expected Completion Date: _____

Course Selection: 1) _____ 2) _____

1. I understand that this course will become part of my permanent high school transcript including grade point average (GPA).
2. I understand that online attendance is important to my success in this course and commit to spending 60-75 minutes a day per course five or more times per week (every school day).
3. I will complete and print a copy of the pacing guide found in each of my distance courses. I will refer to the pacing guide(s) often so that I can look ahead and submit my assignments on or ahead of schedule.
4. I understand that if I fall behind my pacing guide it is my responsibility to ask my counselor or learning-coach to request a deadline extension. Failure to do so puts me at risk of being dropped from the class and/or receiving a failing grade. NOTE: Students more than 10 days behind on the pacing guide may be dropped from the course.
5. I will not copy or plagiarize information from the internet, textbooks, other students or any other resources in order to complete my assignments.
6. I understand that cheating and plagiarism are serious offenses and that my school will determine the consequences which could include failing the course.
7. I will be courteous and respectful to my eTeacher and other class members (follow the rules of netiquette) at all times.
8. I understand that my school or eTeacher may contact my parent or guardian at any time if there are any concerns about my progress.
9. I understand that it is my responsibility to seek help when needed. If I do not understand a lesson resource or assignment, I should message my eTeacher for further instruction and communicate with my learning coach.
10. I understand that I will receive zeros for any assignments that are not completed.
11. I understand that the final exam must be proctored in a VLA approved lab.

Student: I verify that I have read and agree to all the conditions as written above.

Student Signature: _____

Email: _____ Phone: _____

Parent/Guardian: I verify that I have read my student's contract as written above.

Signature: _____ Relationship to student: _____

Email: _____ Phone: _____