

# PWSD 100% virtual application for first 9 weeks

This application must be completed if you and your child choose for him/her not to attend on campus for the first 9 weeks of the school year 2020-2021.

\* Required

1. Student's Name \*

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2. Student's grade as of 2020-2021 school year \*

*Mark only one oval.*

Kindergarten

1st grade

2nd grade

3rd grade

4th grade

5th grade

6th grade

7th grade

8th grade

9th grade

10th grade

11th grade

12th grade

3. Parent's Name (must be parent with primary custody based on documentation from previous school year) \*

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4. phone number to verify information presented on this form \*

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5. I, the parent or guardian of the student named above, understand that my student will not be allowed on campus at any time during the first 9-weeks for any school event or activity, and I will be responsible for ensuring all my students work is turned in on time in the correct manne understand that I am responsible for providing internet for my student to complete his/her assignments and if my student does not meet the standards set by the teacher, my student w not obtain credit for those classes. \*

*Check all that apply.*

I completely understand the requirements and rules regarding the 100% virtual option and agree to comply.

My child understands the requirements and rules regarding 100% virtual and agrees to comply.

6. Signature to authorize the information above:

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