

This form must be completed prior to being enrolled in an online course

PowerSchool	
Copied	
Enrolled	

IEP or 504

2021 - 2022 Virtual Course Registration

Semester 1 2

Student Name:	Student Email:
Year of Graduation:	Date of Birth:
Student Phone:	Parent/Guardian Name:
Parent/Guardian Email:	Parent/Guardian Phone:
 Please complete the online course reed. Review the course descriptions and the second of the course will be calculated in the course of the cour	nto your student's GPA. dians and their students to monitor progress in these courses. Pleaneir username and password. e(s) they will be required to reimburse Dexter Community Schools
COUNSELING OFFICE ONLY Course Name	Provider STW
ounselor's Signature:	
ounseling office records	Date:

Online Student Readiness Survey - Please check the appropriate selection

1.	Student has experience and is comfortable using a computer.						
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
2.	Student does not need reminders or assistance in completing routine assignments and finishe homework on time.						
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
3.	Student is a self-dire does well working a		equire real time	feedback from teachers and			
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
4.	Student has daily access to a computer and reliable high-speed internet at home.						
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
5.	Student demonstrat	ident demonstrates excellent time management skills.					
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
6.	Student has strong interest in the subject area of the online course.						
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
7.	Student is reading at or above grade level and has strong comprehension skills.						
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		
8.	Student has support at home from an adult who will encourage their online academic success.						
	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree		