POCONO MOUNTAIN SCHOOL DISTRICT CYBER PROGRAM

Date of Application _____

STUDENT INFORMATION

Name	First		Middle	Last		Date of Birth
Address	Number	Street				Apt. #
	City			State	Zip Code	Phone
Email						

CURRENT SCHOOL

School	Name of School		Phone
	❑ Charter/Cyber Charter School ❑ Home School ❑ Traditional School		
Contact	First	Middle	Last
Address	Number	Street	Apt. #
	City	State	Zip Code

Reason for requesting to attend the Pocono Mountain School District's Cyber Program	
Potential scheduling conflicts	

PARENT(S)/GUARDIAN(S) INFORMATION

Name	First		Middle	Last		
Address	Number	Street				Apt. #
	City			State	Zip Code	Phone Number
Email						
Signature	X					
Name	First		Middle	Last		
Address	Number	Street				Apt. #
	City			State	Zip Code	Phone Number
Email						
Signature	X					

UNITED STATES DEPARTMENT OF EDUCATION ETHNIC CODES:

❑ Native American	❑ Asian/Pacific	❑ African American	❑ Hispanic	❑ Caucasian
Grade Level:	Special Ed: ❑ Yes ❑ No		ESL: ❑ Yes ❑ No	

FOR OFFICE USE ONLY:

Student School ID Number:	Date of Received Application:
Date of Interview:	Orientation Date:
Family/District Agreement Date:	Enrollment Date:

POCONO MOUNTAIN SCHOOL DISTRICT CYBER PROGRAM

Is the Pocono Mountain School District Cyber Program the right fit for me?

To find out if you have what it takes to be a successful Pocono Mountain School District Cyber Program student, place a number next to each statement that best describes you as a student:

4 = Strongly Agree
3 = Agree
2 = Disagree
1 = Strongly Disagree

I CAN USE THE COMPUTER AS A TOOL FOR LEARNING…	
	I can communicate using email
	I can use Microsoft Word as a writing tool
	I can search for and locate information on the Internet
	I can participate in on-line chat rooms

I POSSESS THE SKILLS NECESSARY TO BE A SUCCESSFUL CYBER STUDENT…	
	I can follow and respond to written directions easily
	I can use my time efficiently and submit my assignments on schedule
	I am self-motivated, self-directed, and self-disciplined in regards to my studies
	I can work independently

I AM READY TO MAKE A COMMITMENT TO CYBER EDUCATION…	
	I am willing to spend 5.5 hours per weekday at my computer
	I am willing to spend an additional 1-2 hours per week completing additional assignments
	I am honest and can be trusted to do my own course work and assignments
	I am responsible and will care properly for school-issued equipment
	I am aware that my success as a Cyber student is my responsibility
	I am willing to contact VLN Tech Support, when needed

Please complete the following:

I have high-speed internet access in my home: ❑ Yes ❑ No	
The last academic grade I have completed:	

X
_____
Student Signature   Date

X
_____
Parent/Guardian Signature   Date

POCONO MOUNTAIN SCHOOL DISTRICT CYBER PROGRAM

Why do you want to enroll in
Pocono Mountain School District Cyber Program?

Please compose a two to three paragraph essay that outlines the reasons why you would like to attend the Pocono Mountain School District Cyber Program:

X_____

Student Signature   Date

POCONO MOUNTAIN SCHOOL DISTRICT CYBER PROGRAM
Application for 6-12 Enrollment

Upon enrolling in the Pocono Mountain Cyber School, I agree to:

- ✓ Complete the Pocono Mountain School District Cyber Program enrollment process
- ✓ Provide my transcript from any previous schools at time of enrollment in the Pocono Mountain School District
- ✓ Notify the Pocono Mountain School District's Cyber Program of any difficulties connecting to the curriculum delivery system
- ✓ Notify the Pocono Mountain School District Cyber Program for support, as needed
- ✓ Notify the Pocono Mountain School District Cyber Program of any change in status
- ✓ Document evidence of active participation in all courses in which I am enrolled
- ✓ Complete all courses in which I am enrolled in their entirety within the specified time allotted
- ✓ Complete all mandated medical screenings prior to enrolling in the program
- ✓ Complete all required statewide testing as specified by the Pennsylvania Department of Education and the Pocono Mountain School District
- ✓ Be removed from the Pocono Mountain School District Cyber Program if found to be involved in any form of academic and behavioral impropriety
- ✓ Acknowledge that failure to comply with Pennsylvania State Compulsory Attendance may result in truancy charges and that student/parent/guardian may be responsible for paying related costs in full
- ✓ Return equipment and related materials within two weeks of completion of, or withdrawal from, Pocono Mountain School District's Cyber Program. Failure to do so may result in additional charges
- ✓ Return all textbooks to the Pocono Mountain School District within two weeks of completion of, or withdrawal from, the Pocono Mountain School District's Cyber Program, if applicable

X
_____
Student Signature   Date

X
_____
Parent/Guardian Signature   Date

X
_____
Pocono Mountain School District Cyber Program Principal   Date