

POCONO MOUNTAIN SCHOOL DISTRICT CYBER PROGRAM

Application for Enrollment



Date of Application _____

STUDENT INFORMATION

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

CURRENT SCHOOL

School	Name of School			Phone	
	<input type="checkbox"/> Charter/Cyber Charter School		<input type="checkbox"/> Home School	<input type="checkbox"/> Traditional School	
Address	Number	Street		Apt. #	
	City		State	Zip Code	
Reason for requesting to attend the PMSD Cyber Program					
Potential Scheduling Conflicts					

PARENT(S) / GUARDIAN(S) INFORMATION

Name	First	Middle	Last	Date of Birth	Student ID #
Address	Number	Street		Apt/ #	
	City		State	Zip Code	Phone
Email					
Signature	X				
Name	First	Middle	Last	Date of Birth	Student ID #
Address	Number	Street		Apt/ #	
	City		State	Zip Code	Phone
Email					
Signature	X				

UNITED STATES DEPARTMENT OF EDUCATION ETHNIC CODES

<input type="checkbox"/> Native American	<input type="checkbox"/> Asian/Pacific	<input type="checkbox"/> African American	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Caucasian
Grade Level:	Special Ed: <input type="checkbox"/> Yes <input type="checkbox"/> No	ESL: <input type="checkbox"/> Yes <input type="checkbox"/> No		

FOR OFFICE USE ONLY:

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

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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:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The last academic grade I have completed:		

X

Student Signature

Date

X

Parent/Guardian Signature

Date

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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

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Upon enrolling in the Pocono Mountain Cyber Program, 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 Director

Date