

# Rosendale-Brandon School District Online Learning Option Enrollment Form

Student Name \_\_\_\_\_ Male/Female  
(First Name) (M.I.) (Last Name) (Circle one)

Date of Birth \_\_\_\_\_ Last Grade Completed \_\_\_\_\_ Projected Graduation Class of \_\_\_\_\_

Parent/Guardian Names(s) \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Phone Contact \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent/Guardian E-mail \_\_\_\_\_ Student E-mail \_\_\_\_\_

## **Please check which online option the student will be participating in:**

- ☐ Full time student and a resident of the Rosendale-Brandon School District.
- ☐ Part time student and a resident of the Rosendale-Brandon School District
- ☐ Home schooled student and a resident of the Rosendale-Brandon School District.  
**NOTE:** Student must register with the Rosendale-Brandon School District any time prior to the start of the school year. Student may take up to two courses per semester.
- ☐ Full time student, not a resident of the Rosendale-Brandon School District, (open enrolled).  
**NOTE:** Student must apply for Full-time Open Enrollment at the State of Wisconsin DPI website:  
<http://www.dpi.wi.gov/sms/psctoc.html> between February and April. Students must take online courses on site at a Rosendale-Brandon School.
- ☐ Part time student, not a resident of the Rosendale-Brandon School District, (open enrolled).  
**NOTE:** Student must apply for Part-time Open Enrollment with the State of Wisconsin DPI website:  
<http://www.dpi.wi.gov/sms/partime.html> between February and April. Students may take 2 courses at one time.

## **Current School Status**

1. Are you currently a resident of the Rosendale-Brandon School District? **Yes** **No**  
**If no, have you filed for Part-time or Full-time Open Enrollment?** **Yes** **No** – see notes above
2. Are you currently enrolled in the Rosendale-Brandon School District? **Yes** **No**  
**If no, please complete the following as they apply.**
- I currently attend a private school. School name is \_\_\_\_\_
  - I am currently enrolled in a school outside the Rosendale-Brandon School District. The name and address of the school is \_\_\_\_\_
  - Have you been home schooled? **Yes** **No**  
*If you have been home schooled and you intent to receive a diploma from the Rosendale-Brandon School District, you will need to provide us with materials that you have completed to verify coursework in order to issue credit on a transcript.*

- I am currently not enrolled in school. The date I last attended a school was approximately \_\_\_\_\_  
The name of the last school I attended is \_\_\_\_\_

3. Does the student have an IEP? **Yes** **No**  
**If yes**, please identify the Case Manager's Name \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

4. Do you have the necessary technical resources needed to take an online course? **Yes** **No**

5. Have you ever taken an on-line course? **Yes** **No**

6. Have you attended another on-line school? **Yes** **No**  
**If yes**, please name the school and reason for leaving:  
\_\_\_\_\_

Use the following link to find the Wisconsin Virtual School course(s) list: <http://www.wisconsinvirtualschool.org/>

Requested Course(s) \_\_\_\_\_  
\_\_\_\_\_

I agree to adhere to all Rosendale-Brandon School District policies, rules and acceptable use policies. I agree to abide by all Wisconsin Virtual School (WVS) policies. I will maintain personal integrity in completing my own work on pace with the class I am taking. I am aware that attendance and truancy applies to virtual classes. I have access to a computer with minimum computer requirements.

**Student Signature** \_\_\_\_\_

I give my student, named above, permission to take online class(es) from the Rosendale-Brandon School District and the Wisconsin Virtual School for the 2012-2013 school year. I understand that if my student drops after the deadline date, fails to complete, discontinues or fails virtual school courses, I will be required to reimburse the Rosendale-Brandon School District for expenses incurred for the virtual school course. Materials are the property of the Rosendale-Brandon School District and must be returned. Responsibility for damage to materials will be that of the parent/guardian.

**Parent/Guardian Signature** \_\_\_\_\_

The student, named above, has permission to take the courses listed above for credit from the Rosendale-Brandon School District.

**Rosendale-Brandon Middle School/High School Guidance Counselor** \_\_\_\_\_

"The Rosendale-Brandon School District does not discriminate on the basis of sex, race, disability, religion, sexual orientation, national origin, ancestry, creed, pregnancy, marital, or parental status."

For Office Use Only:

Received: _____	Date Registered: _____	Date Course Completed: _____	LEG Assigned: _____
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**Return this form to any Rosendale-Brandon School District Office.**