



Summer Online Health Course Original Credit Application

PART I Student Information

Name: _____ ID: _____

Email Address: _____ Phone Number: _____

Middle School Campus: _____ High School Campus: _____

Does the student have accommodations/modifications through 504/Special Education? YES/NO (circle one)
Include the following with this application:

- List of accommodations/modifications
- IEP and ARD paperwork/meeting notes

Is the student an athlete? YES/NO (circle one)

IMPORTANT NOTE: While it is unlikely that a student athlete will need the local elective Health credit for NCAA eligibility purposes, please be advised that Edgenuity coursework in FBISD does not meet approval criteria for the NCAA at this time. Please see your counselor if you have questions or concerns regarding this information.

PART II Guidelines

1. **This opportunity is only for students who will be in the 9th – 12th grades in the 2016-2017 school year.**
2. Student must have transportation to and from both the Start-Up Session and Final Exam.
3. Students will need to attend a Start-Up session to obtain instructions and login information.
4. Students must have an active email account to communicate with Campus Staff.
5. Final exams must be taken at the home campus and may be taken only **ONCE**. Students must have a photo ID to verify identity. **All coursework must be completed before taking the final exam.**
6. To earn credit, students must have an overall average of at least 70 **AND** achieve a minimum score of 65 on the final exam.
7. If student does not meet the required Progress Check points, he/she will be required to come to the lab, on a daily basis, until the student is back to the prescribed pace. Failure to attend or stay on pace will be grounds for removal from course.

PART III Registration, Orientation, Summer O-Lab

Summer hours: 8:00am – 12:00pm

FBISD will be closed on Fridays and during the week of July 4-8.

Registration:	May 5th-June 1	7:30 am-3:00 pm	2125
Orientation:	June 6th	8:00 am-11:00 am	2125
O-Lab Schedule:	June 6-July 28th	8:00 am-12:00 pm	2125

PART IV Cost: \$50.00 for students not on free/reduced lunch (cash only)

\$25.00 for students on free/reduced lunch (cash only)

Cost is non-refundable after June 16.

If you have questions, please contact the Online Learning Teacher, Kevin Byrd, at 2816341378.

Parent/Guardian Signature for Approval of Original Credit: _____

Parent/Guardian Phone: _____ Email: _____

Signature of Student Applicant: _____

Counselor Signature for Participation: _____

Administrator Signature: _____ Date: _____

For Office Use Only: Date Paid _____ Bookkeeper signature _____ Paid (circle one) \$50 \$25

Course Completion: _June 16_ (25%) _June 30_ (50%) _July 14_ (75%) _July 28_ (Complete)

