

**Remote Instruction Option Form**

The following form must be completed in full and returned no later than Wednesday, August 26, 2020. If you voluntarily elect this option, remote learning will begin on the first day of school day, Monday, September 14, 2020, and must continue through the first 10 weeks of school, ending Tuesday, November 24, 2020. In other words, you will not have the opportunity to elect to return to in-person instruction until Monday, November 30, 2020. Remote instruction will be provided through Google Classroom which combines live online instruction with pre-recorded instruction. Should you wish for your child to return to in-person or hybrid instruction, you must inform the District no later than Monday, November 16, 2020. I have read and understand the information provided concerning the voluntary remote only learning option.

1) Student Names:

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I request my child(ren) listed above be enrolled in an all-remote option of instruction for the period of time from Monday, September 14, 2020 through Tuesday, November 24, 2020.

I understand that in order to opt out of the in person learning plan, I need to notify the District in writing no later than Wednesday, August 26, 2020. I understand this is necessary due to the impact on staff scheduling and transportation that will occur if I change my decision and request my child(ren) attend school for direct instruction in the future.

I understand that, once enrolled, my child(ren) will be enrolled in this remote learning for the entire first marking period ending Tuesday, November 24, 2020.

I understand that since I have elected remote learning, no transportation will be provided for my child(ren) for any purpose.

I understand the remote learning option is only available for the duration of any government ordered emergency situation involving the COVID-19 crisis and will be null and void after such emergency is declared over at which time normal instructional attendance and transportation rules shall apply.

I understand that since I am requesting that my child(ren) be exempted from attending district instruction at school as has been made available to me and instead receive alternative remote instruction that I am in agreement with and will honor all of the above conditions.

Parent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Parent Contact Information: Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_

If you have any questions, please contact your building principal.

**\*\*This form must be returned by mail or in person by Wednesday, August 26, 2020 if you are opting for remote instruction\*\***