



Timberlake Public Schools
Virtual Academy Application

Our Mission

Timberlake strives to meet the individual needs for each student by using creative solutions that provide the most successful academic outcomes while maintaining the safety and well-being of our students and our community.

2020-2021 Program Application

Program Summary

The Timberlake Virtual Academy is being developed due to the evolving demands of our student population. A variety of factors are leading to an increase in demand of creative schooling options for young people, primarily virtual options. For this reason, Timberlake Virtual Academy is finding an innovative way to provide these opportunities to students, while at the same time maintaining a connection with peers, faculty, and our community. Please read the below expectations for each partner in the academy, school, student, and parent. Participation in the academy is based on fulfillment in those expectations and your application process, as Administration will only admit students whose best opportunity for success is in this semi blended setting.

School, Student, and Parent Expectations.

Prior to completing this application, ENSURE you and your child has read, discussed, and agree with the Timberlake Virtual Options Parent and Student Handbook.

STUDENT NAME

PARENT NAME

AGE/BIRTHDATE

20-21 GRADE

STUDENT EMAIL ADDRESS

PARENT EMAIL ADDRESS

HOME ADDRESS (must be in Timberlake District)

PARENT PHONE NUMBER (1)

PARENT PHONE NUMBER (2)

CURRENT # CREDITS (HS)

PARENT PORTION OF APPLICATION

INITIAL YOUR CHOICE FOR THE NEXT 4 QUESTIONS:

I will allow my student to be taken off campus for school sanctioned trips _____yes _____no

I will allow my students name, photo or videotaped image for public purposes _____yes _____no

I understand the school is not responsible for anything lost or stolen _____yes _____no

I will allow my student to open campus access and release Timberlake Public Schools from any responsibility or liability for an accident or injury that may occur in their arrival or departure to or from school campus to utilize the resources available. _____yes _____no

DO YOU NEED ASSISTANCE WITH WIFI ACCESS? (YES OR NO) _____

DOES THE STUDENT HAVE A MEDICAL ALERT, 504, OR IEP? _____

HAS THIS APPLICANT BEEN DROPPED FOR TRUANCY OR DOES THE APPLICANT HAVE AN ATTENDANCE PATTERN CAUSING CONCERN? _____

HAS THE APPLICANT SHOWN SIGNS OF ACADEMIC DECLINE, FAILING MOST OR ALL OF HIS/HER COURSES? _____

WILL THE APPLICANT HAVE PARENT SUPPORT TO PROVIDE SUCH ENVIRONMENT FOR SUCCESS WITH ONLINE LEARNING AT HOME? _____

HAS THE APPLICANT BEEN ENROLLED INTO A VIRTUAL PROGRAM IN THE PAST? _____

WHY IS THE APPLICANT CONSIDERING ENROLLMENT INTO THE PROGRAM?

EXPLAIN HOW YOU WOULD LIKE TO SEE THE VIRTUAL EDUCATION LEARNING EXPERIENCE MEET YOUR CHILD'S INDIVIDUAL NEEDS.

EXPLAIN THE BENEFITS FOR ENROLLING YOUR CHILD INTO VIRTUAL EDUCATION COURSES

STUDENT PORTION OF APPLICATION

The next section is to be completed by the applicant requesting to enroll into a virtual program.

THINK ABOUT YOUR READINESS BY ANSWERING THESE QUESTIONS.	YES	NO
Good Time Management: Can you create and maintain a study schedule throughout the semester with limited face-to-face interaction with a teacher?		
Effective Communication: Can you ask for help, make contact with other students and the instructor online, and describe any problems with learning materials using email, instant messaging, and/or the telephone?		
Independent Study Skills: Can you study and complete assignments without direct supervision and maintain the self-discipline to stick to a schedule?		
Self-Motivation: Do you have a strong desire to learn skills, acquire knowledge and fulfill assignments in on-line courses because of an educational goal? Can you maintain focus on that goal?		
Academic Readiness: Do you have the basic reading, writing, math, and computer literacy skills to succeed in the class?		
Technologically Prepared: Do you know how to open, create and/or save a document; use various technology tools (e.g., dictionary, thesaurus, grammar checker, calculator); and identify various file formats?		

EXPLAIN HOW ENROLLING INTO VIRTUAL EDUCATION COURSES MAY BENEFIT YOU

- Credit Recovery
- Inability to attend class during the school day
- Personal Preference
- Online Learning Experience
- Graduation Requirement
- Safer learning environment due to health concerns
- Other: _____

WHAT ASPECTS OF THE PROGRAM SPECIFICALLY INTEREST YOU?

WHAT ARE YOUR EDUCATIONAL GOALS? HOW WOULD THIS PROGRAM HELP YOU ACHIEVE THOSE?

WHAT CHALLENGES DO YOU SEE WITH YOUR ENROLLMENT IN THE PROGRAM?

WHAT EXTRACURRICULARS, IF ANY, ARE YOU INTERESTED IN?

**Return the completed application to the superintendent's office in
Helena by August 1, 2020**

BY SIGNING THE BELOW PORTIONS YOU ARE EXPRESSING YOUR COMMITMENT TO THE EXPECTATIONS AND PROGRAM DESCRIPTION WRITTEN ABOVE.

I have answered all questions in this readiness questionnaire to the best of my judgment with the understanding this questionnaire may assist with making a determination for my child's best educational placement.

STUDENT NAME

DATE

PARENT NAME

DATE

STUDENT INITIAL YOUR CHOICE

After age 18: I give permission for school officials to make contact with my parent/guardian.

_____ **yes** _____ **no**