

CLAY VIRTUAL ACADEMY

BLENDED STUDENTS

Blended students **share** their combined schedule of six classes between the brick and mortar school and CVA. This packet is not for VLL placement.

Students who would like to blend their schedules must meet with the guidance counselor at the brick and mortar school to obtain approval and assistance with class choice.

If CVA will be the second school, please complete the following:

1. Create a **Part-Time** VSA account for Student. For detailed instructions scroll to the bottom of <http://cva.oneclay.net/enrollment.html>
2. Parent must create a Parent account in VSA For detailed instructions scroll to the bottom of <http://cva.oneclay.net/enrollment.html>
3. Complete **all** three pages of the Blended Registration Packet and have it signed by parent and brick and mortar school guidance counselor.
4. Turn all three forms into the guidance counselor at the brick and mortar school, who will forward it to CVA for scheduling. Forms may be emailed to tscrawford@oneclay.net or faxed to (904)336-9881.

If a student/parent chooses CVA as first school, the student and parent/guardian must complete an application for Full-Time enrollment on our website, print registration documents and choose a date to come in and meet with a CVA counselor.

**CLAY VIRTUAL ACADEMY
BLENDED REGISTRATION**

**Shared schedule of six classes between brick and mortar and CVA
(Not for VLL or after-hours courses)**

NAME: _____ GRADE: _____ STUDENT # _____

ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____

PARENT NAME: _____ CELL PHONE: _____

SCHOOL: _____

I have set up a VSA Student account: Yes _____ No _____

Parent has set up a VSA Parent account: Yes _____ No _____

Please note: Blended Registration cannot be completed until both accounts have been set up.

COURSES TO BE TAKEN THROUGH CVA (Please check which segment):

_____ Segment One Segment Two

_____ Segment One Segment Two

_____ Segment One Segment Two

_____ Segment One Segment Two

_____ Segment One Segment Two

I understand all state mandated exams will be taken through my first school. If I am a senior, I will graduate with my first school. The first school, listed above, will be responsible for my records.

Student Signature

Date

Parent Signature

Date

Brick and Mortar Guidance Counselor Signature

Date

Please make sure you have read and signed the CVA Contract, and completed the Email Transmission Form. These must be submitted along with this form.

BLENDDED STUDENT
CVA Parent and Student Responsibility Contract

Parent/Learning Coach

The parent will serve as the Learning Coach, helping the student stay on track with completing lessons and submitting assignments on time, making sure the student completes all Discussion Based Assessments (DBAs) and adheres to all standards of academic integrity. The parent will regularly log in to the VSA Parent account and follow up with emails and student progress, as needed.

Student Work

- The student needs to have home access to a computer with high-speed internet connection, printer, scanner, microphone and speakers or headset/microphone, and phone.
- The student needs a dedicated workspace and approximately 5-6 hours per week to commit per course
- The student will check email and course dashboards each school day.
- The student/parent will return all CVA calls and correspondence within two school days.
- Students will follow and maintain the pace chart for each course.
- Students will attend virtual live lessons, or view the recordings, (if offered) and complete assignments for these lessons.

Withdrawals

Unless there are extenuating circumstances, the student will not withdraw from Clay Virtual Academy until the end of the semester.

_____ I understand grades are posted at the end of each semester.

_____ I understand CVA Administration can withdraw a student for non-compliance of the above responsibilities.

_____ I understand all classes have a 21 day grace period. If, at the end of the 21 days I am not on pace, I will be withdrawn and must return to the brick and mortar school.

Parent Signature

Date

Student Signature

Date

**School District of Clay County
Consent and Release
Email Transmission of Student Information**

Student Name: _____

Student ID: _____

Address: _____

Email Address(es) to receive transmission: _____

By signing this release, I am consenting to the use of email to transmit factual information about my student and releasing the School District of Clay County from liability should such emails be received by unauthorized parties and/or cause a libelous incident. I understand that the email address listed above will be used until I appear at the school with a written notice to discontinue use of the email address. I understand further that email is not a private medium and that e-mail can be edited and redistributed without the knowledge or permission of the originator, and that at no time, can a staff member email medical or subjective information such as behavior.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Phone number(s) _____

Date of Request: _____ **Date entered in TERMS** _____

Original – School

Copy 1 – Parent

Copy 2 – Teacher