

LANCERS ONLINE

Enrollment Application



Date of Application _____

STUDENT INFORMATION				
Name	First	Middle	Last	Preferred Name
Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male			
Date of Birth				
Grade Level				
Special Ed Status	<input type="checkbox"/> None <input type="checkbox"/> IEP <input type="checkbox"/> GIEP <input type="checkbox"/> 504			
Address	Street			Apt. #
	City	State	Zip Code	
Phone				
Email				
Current School	<input type="checkbox"/> Montrose Area SD <input type="checkbox"/> Cyber Charter School <input type="checkbox"/> Charter <input type="checkbox"/> Home School <input type="checkbox"/> Other			
	Name of School			Phone
	Address			
Reason for applying to Lancers Online				
Potential Schedule Limitations (i.e. part-time job, sports training, etc.)				

PARENT/GUARDIAN INFORMATION				
Name	First	Middle	Last	
Address	Street			Apt. #
	City	State	Zip Code	
Email				
Phone				
Name	First	Middle	Last	
Address	Street			Apt. #
	City	State	Zip Code	
Email				
Phone				

FOR OFFICE USE ONLY:	
Date Application Received:	Family/District Agreement Date:
Date of Interview/Meeting:	Orientation Date:
Enrollment Date:	Program Start Date:

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Upon enrolling in Lancers Online, I agree to:

- ✓ Complete the Lancers Online enrollment process
- ✓ Provide my current transcript from the previous school year at time of application
- ✓ Notify the Lancers Online Cyber Coordinator of any difficulties connecting to the curriculum delivery system
- ✓ Notify the Lancers Online Cyber Coordinator for support, as needed
- ✓ Notify the Lancers Online Cyber Coordinator of any change in status
- ✓ Document evidence of active participation in all courses in which I am enrolled
- ✓ Complete all courses in which I am enrolled in their entirety within the specified time allotted
- ✓ Complete all mandated medical screenings prior to enrolling in the program
- ✓ Complete all required statewide testing at specified General McLane School District building
- ✓ Be removed from Lancers Online if found to be involved in any form of academic impropriety
- ✓ Acknowledge that failure to complete enrolled courses may result in truancy charges and that student/parent/guardian may be responsible for paying related costs in full
- ✓ Return equipment within two weeks of completion of, or withdrawal from, Lancers Online. Failure to do so may result in additional charges.
- ✓ Return all textbooks to General McLane School District within two weeks of completion of, or withdrawal from, Lancers Online.

X

Student Signature

Date

X

Parent/Guardian Signature

Date

X

Lancers Online Administrator Signature

Date

Course Enrollment
(To be completed with counselor or district administrator)

COURSE NAME	ASSIGNED TERM (Full Year, Fall/Spring, Quarter 1/2/3/4)

ENROLLMENT NOTES (On-Campus Courses, Scheduling Needs, Etc.)