**Off Campus Florida Virtual/Brevard Virtual Contract**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_
 *First Name Last Name*

|  |
| --- |
| \_\_\_ For Credit Recovery  |
| \_\_\_ For Online Course Requirement |
| \_\_\_ Other |

Grade: \_\_\_\_\_\_\_\_Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check one:

How many courses and what classes do you plan on taking through FLVS/BVS: \_\_\_\_\_\_\_
To view the different courses go to <https://www.flvs.net/flex/courses>

|  |  |
| --- | --- |
| Semester 1: | Semester 2: |
| 1) | 1) |
| 2) | 2) |
| 3) | 3)  |

I have signed up for a FLVS/BVS class. I agree to the following:

1. I must have 7 classes at all times- I can only take 3 at a time on FLVS/BVS and I must take the other 4 at VHS or Dual Enrollment (limited 3 Dual Enrollment classes)
2. I must sign up for classes within one week of the semester or I will be re-enrolled in a class at VHS
3. If I finish a class within a couple of weeks of the semester, then I must sign up for another FLVS/BVS class
4. Being dropped from a class one semester will result in not being able to take an FLVS/BVS class the following semester.
5. I need to enroll in the same number of classes as I have periods off campus for FLVS/BVS classes

Example: off campus for two periods then you need to take two FLVS/BVS classes

1. Taking classes in the summer or taking more than the requirement does not waive the number of classes you have to take during a semester- You must have 7 classes at all times.
2. I must have classes completed by May 1st if they are required for graduation.
3. I must provide my own transportation.

If I do not agree to the requirements above or do not sign up for courses (even if I do not need the credit) then I will be placed back into courses at Viera High School.

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Student Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Parent Signature Date