

STUDENT NAME: _____

GRADE: _____

Enemy Swim Day School 2020-2021 Student/Parent Remote Learning Agreement

REMOTE LEARNING START DATE: MONDAY, AUGUST 24th, 2020

_____ I understand that I must be present daily for remote instruction and other learning activities for approximately six-hours a day.

_____ I understand that I am required to complete the same amount of schoolwork as students that are in person in school.

_____ I understand that I and my parent/guardian are responsible for my learning, but I may ask for help by contacting the teacher from 3:30-4:00 pm or by emailing or leaving messages on our Google Classroom.

_____ I understand that I will be given an iPad or Chromebook and that it is my responsibility to care for it as agreed in the Internet Use Agreement Policy and returned to ESDS when remote learning is complete.

_____ I understand that I can only opt in or out of in-person school each quarter by notifying the principal in writing two weeks before the end of the preceding quarter.

THIS FORM IS DUE AUGUST 10th, 2020

Student Signature

Date

Parent Signature

Date

ADMINISTRATIVE USE ONLY

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