



Virtual/Online Learning Parent Permission

School District: **Benzie County Central Schools**

Student Name: _____ Student Grade: _____

Virtual learning is a method of receiving academic instruction in courses in which the pupil is registered and the courses are taken through a digital learning environment. Virtual learning may be offered at a supervised school facility during the day as a scheduled class period or through self-scheduled learning where pupils have some control over the time, location, and pace of their education. Virtual learning includes, but is not limited to, online learning and computer-based learning, where the delivery of instruction may incorporate a combination of software, technology, and the Internet.

I, _____, parent or legal guardian of _____ give permission for his/her enrollment in district approved virtual/online course(s). I understand my student will be enrolled in the courses should it be in their best interest.

Parent Signature: _____ Date Received: _____

Student Signature: _____ Date Received: _____

Notes: **Please return the signed permissions to the MS/HS Counseling Dept.**