IDLA STUDENT ENROLLMENT FORM

UDENT NAME:		YEAR OF GRADUATION:	
ADDRESS:			
ZIP: PHONE:			
STUDENT EMAIL (PLEASE PRINT CLEARLY):			
PARENT NAME:	PARENT PHON	E:	
PARENT EMAIL (PLEASE PRINT CLEARLY):			
REASON FOR ENROLLING DURING SCHOOL:	SCHEDULE CONFLICT	CREDIT RECOVE	ERY OTHER
REASON FOR ENROLLING AS OVERLOAD/SUMMER:	FAST FORWARD (HS)	CREDIT RECOV	ERY OTHER
NAME OF COURSE:	Hig	h School	Middle School
NAME OF COURSE:	Hig	High School Middle School	
Is the student on an IEP? Is the	he student on a 504?		
held as deposit and only cashed if the student does not re (with "C" or above), checks will be shredded. Please turn i	=	· ·	
(with "C" or above), checks will be shredded. Please turn i processed. 2) All courses taken through IDLA will be put o withdrawal deadline, the student will receive an "F" for the COUNSELOR ASAP IF YOU DROP YOUR IDLA CLASS! If you and check will be shredded. 3) Students who are not self-courses. End of course EXTENSIONS will not be granted by ONLY during the period and not any other work. Staff is a monitor student's progress in the course.	n the \$75.00 course fee with the nother student's transcript.** If a see course and check will be cash withdraw before IDLA's deadling motivated or self-driven are not by the school. Students are expectable for assistance when need	s registration in ord course is dropped ed. PLEASE NOTIFY ne, your student red encouraged to enr ted to work on IDL ded, but is not resp	der to be after the IDLA YOUR ceives no grade oll in IDLA A class work consible to
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Advanced Opportunity_____ Date Entered in Portal: _____.

FOR OFFICE USE ONLY: Check #:_____