



Registration for VHS NetCourses 2008-2009
Successful VHS students are self-directed, self-motivated problem-solvers

Student Name _____ Student Number _____
Street Address _____ City _____ Zip _____
Email Address _____ Phone # _____
Home Room _____ Grade Level 200 8-2009 _____
Guidance Counselor _____

Program Notes:

- There is no guarantee that the courses applied for will be available. The VHS Site Coordinator will register on-line as soon as the application is received, and notify the student.
The VHS catalog indicates approved electives and VHS Levels, Grade Level and Semester. The full VHS catalog is available on-line at www.goVHS.org
*Note Semesters: Full Year, Fall, Spring

Table with 5 columns: Course Selection, Course Number, Level, Grade Level, Semester*. Rows for 1st and 2nd semesters, each with 3 numbered entries.

I understand that participation in the second semester of VHS is dependent upon full participation in my first semester as a VHS student.

Student Signature: _____

I give my child permission to participate in the Virtual High School.

Parent Signature: _____

I recommend this student for participation in the Virtual High School.

Guidance Counselor Signature: _____

Please include a short essay on your reasons for taking a VHS course.

Send Completed Applications to: Mr. Frank Bernardo Room 162 (EDP)