Distance Delivery Approval Form

Print Form



School Counselor Signature

Office of Teaching and Learning Mat-Su Borough School District 501 N. Gulkana Palmer, AK 99645

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Instructions: Students wishing to take courses through a distance delivery model for high school credit may do so with prior administrative approval. Students must submit this form to their school counselor. The request must be reviewed and signed before the student may register for the distance delivery course. The Original Form is to be filed in the student's permanent file after approval, one copy is to be filed with the counselor, and one copy is for the student. Student ID # Student Name Phone Number Grade Level Graduation Year High School In accordance with BP 6146.2, the above named student requests prior approval for taking the following distance education course: Course Name Final Exam Proctor Distance Delivery Course Vendor: Other: Attach a detailed course syllabus (including topics covered, instructional goals of course, materials being used, assignments required, grading policy, criteria for successful completion, instructional time requirements, proof of accreditation, and instructor's credentials. Credit requested for this course is Required ☐ Elective Reason for taking this course: ☐ Acceleration ☐ Athletic Eligibility ☐ Credit Recovery ☐ Other: How many Distance Delivery Credits have already been received and/or are in progress? Please list the course title(s) and choose the status - Completed or In Progress - from the drop-down menu. I have read and agree to follow the guidelines of the Mat-Su Borough School District's Other Credit Option Policy. I understand that it is my responsibility to submit an official transcript of my grade(s) in a timely manner in order to receive credit toward graduation. Student Signature Date Parent/Guardian Signature Date Recommendations (Signature indicates approval of Distance Delivery Credit is recommended)

Date

School Principal Signature

Date