

# Morris Virtual Learning Academy

## *Application*

Due July 1 at District Superintendent's Office

Student Name \_\_\_\_\_

Student Age \_\_\_\_\_

Student Grade \_\_\_\_\_

Physical Address \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

Please give school history for the past three years (examples: attended Morris; EPIC; home school; attended Okmulgee Public Schools; attended Henryetta/Morris Public Schools).

2018-19 \_\_\_\_\_

2017-18 \_\_\_\_\_

2016-17 \_\_\_\_\_

\*\*\*\*Please see requirements in the Morris Virtual Learning Academy Informational Document

**Morris Virtual Learning Academy**  
**VIRTUAL SCHOOL READINESS APPLICATION**

Morris Public Schools makes every effort to assist with the change of placement for a student considering virtual school. It is critical to make a determination if virtual school will be an appropriate educational placement. Virtual school isn't for every student. To be successful, a student must be independent and self-motivated. The following questions are to assist with this determination. Please answer the following questions honestly and to your best ability.

**Parent/Guardian Survey:**

Think about applicant's readiness by answering the following questions:	Yes	No
1. Is the applicant a resident of the Morris School District?		
2. Do you have daily access to a computer or a device that has access to internet?		
3. Does the applicant have a medical alert, 504 or IEP?		
4. Has this applicant been dropped for truancy or does the applicant have an attendance pattern causing concern?		
5. Has the applicant showed signs of academic decline, failing most or all of his/her courses?		
6. Is the applicant on track to graduate with the required credits and courses?		
7. Will the applicant have parent support to provide such environment for success with online learning at home?		
8. Has the applicant been enrolled into a virtual school program in the past?		

**Please answer the following questions:**

1. Please explain why this student wants to enroll into an online course/courses:

---

---

2. Explain how you would like to see the virtual school program meet your child's individual needs?

---

---

3. What challenges might your student encounter with virtual school?

---

---

4. Explain the benefits for enrolling your child into virtual school courses.

---

---

Instructors with years of online teaching experience agree that students who have a successful, satisfying experience learning online share several critical characteristics. The next section is to be completed by the applicant requesting to enroll into virtual school

**Student Survey:**

Think about your readiness by answering these questions:	Yes	No
<b>Good Time Management:</b> Can you create and maintain a study schedule throughout the semester without face-to-face interaction with a teacher?		
<b>Effective Communication:</b> Can you ask for help, make contact with other students and the instructor online, and describe any problems with learning materials using email, texting and/or the telephone?		
<b>Independent Study Habits:</b> Can you study and complete assignments without direct supervision and maintain the self-discipline to stick to a schedule?		
<b>Self-Motivation:</b> Do you have a strong desire to learn skills, acquire knowledge and fulfill assignments in on-line courses because of an educational goal? Can you maintain focus on that goal?		
<b>Academic Readiness:</b> Do you have the basic reading, writing, math and computer literacy skills to succeed in the class?		
<b>Technologically Prepared:</b> Do you know how to open, create and/or save a document; use various technology tools (e.g., dictionary, thesaurus, grammar checker, calculator); and identify various file formats?		

**Reasons why you want to take the course(s) online?**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Course(s) not available at school | <input type="checkbox"/> Credit Recovery                              | <input type="checkbox"/> Personal Preference        |
| <input type="checkbox"/> Schedule Conflict                 | <input type="checkbox"/> Unable to attend class during the school day | <input type="checkbox"/> Online Learning Experience |
| <input type="checkbox"/> Credit Acceleration               | <input type="checkbox"/> Personal Enrichment                          | <input type="checkbox"/> Graduation Requirement     |

Other: \_\_\_\_\_

**I would rate my computer skill level as:**

- Good                                       Fair                                       Poor

**What do you think your biggest challenge may be?**

---



---

**Explain how enrolling into virtual school courses may benefit you.**

---



---

I have answered all questions in this readiness questionnaire to the best of my judgment with the understanding this questionnaire may assist with making a determination for my child's best educational placement.

Parent Signature: \_\_\_\_\_ Student Signature: \_\_\_\_\_