

Enrollment Requests for Online Courses

6144.2E-A

Student Information	DC Everest	Parent/Guardian Information	
Student Name		Parent/Guardian's Name	
DOB / Grade / Gender		Parent/Guardian's Email	
Student Phone		Parent/Guardian's Phone	
Student Email		Parent/Guardian's Address	
Is there an IEP?		City / Zip	
Purpose for Course ?			
First Online Course?		Request to Attend (circle one)	Appleton e-School or CESA 9
Requesting School	DC Everest	Course Information	
Teacher/ Counselor Name		Course Title	
Teacher/ Counselor Title		Semester 1, 2 or full credit	
Teacher/Counselor Phone		Requested Start Date	
Teacher/Counselor Fax		Projected Completion Goal	
Teacher/Counselor email		Online Teacher Name	
School Street Address		Online Teacher Email	
School City		Online Teacher Phone	
School Zip		Actual Completion Date	
End of Drop Window		Course Grade %	

Procedure for Online Requests

- 1) **The Official School Representative is Dr. Lois Alt, l malt@dce.k12.wi.us**, who approves requests. Be sure to complete all of the boxes except those grayed. Incomplete requests will be returned without processing.
- 2) Completed forms are to be emailed to Rhonda Haas at **rhaas@dce.k12.wi.us**
- 3) Upon receipt of the completed form and approval from Dr. Lois Alt, the student may go online to enroll in the requested course and arrange for the orientation.
- 4) After completing the course, your school's guidance office will receive notification indicating the grade earned.

Counselor Signature		Parent Signature	
Principal Signature		Student Signature	
		Approval by Lois M. Alt, Ed.D.	

Exhibit Adopted: 12/19/06
 Exhibit Revised:
 KAG:ems

Questions or concerns should be communicated to Lois M. Alt, Ed.D.
 359-4221, ext. 1327 or l malt@dce.k12.wi.us

SCHOOL BOARD
 D.C. Everest Area School District
 6300 Alderson Street
 Weston, WI 54476