

Virtual/Online Learning Parent Permission

School District: Manistee Area Public Schools School Building:	
Student Name:	Student Grade:
and the courses are taken through a digital learning	computer-based learning, where the delivery of
	an of give permission for his/her e(s). I understand my student will be enrolled in the courses ear.
Courses will be provided through Accelerate Educ for each student based on grade level and require	eation. These courses will match a predetermined schedule d courses.
Parent Signature:	Date Received:
Notes:	