



# Cottonwood High School

## Partial Distance Learning

### Request Form

Student's Name \_\_\_\_\_ Student I.D. # \_\_\_\_\_

School \_\_\_\_\_ Grade Level \_\_\_\_\_

As the parent/guardian for my student, I am requesting that my student will participate in partial distance learning and partial face-to-face for the 2020-2021 school year. I understand that I am responsible for transporting my student to and from school if needed and that my student will not be allowed on campus during distance learning class times.

Mark either Distance Learning or Face-to-Face instruction for each period and enter the subject after each period.

Distance Learning	Face-to-Face Instruction	Class Period	Subject
		Period 1 A	
		Period 2 A	
		Period 3A	
		Period 4 A	
		Period 1 B	
		Period 2 B	
		Period 3 B	
		Period 4 B	

I understand that this is the best option for my student currently. If my student's plans change, I will contact a Cottonwood administrator for additional learning options.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please note: A separate form is required for each student.