

# LADH206.1Form IHBHE-E1: Distance Learning Student Course Contract

**Directions:** Read through and initial this contract with your parent or guardian. Complete and return to your school's site coordinator: [Click here to enter text..](#)

Student Name: [Click here to enter text.](#)

Date: [Click here to enter a date.](#)

Course: [Click here to enter text.](#)

Expected Completion Date: [Click here to enter a date.](#)

1. I understand that this course will become part of my permanent high school transcript, including grade point average (GPA).

2. I understand that online attendance is important to my success in this course and commit to spending 60-75 minutes a day per course five or more times per week (every school day).

3. I will complete and print a copy of the pacing guide found in each of my distance courses. I will refer to the pacing guide(s) often so that I can look ahead and submit my assignments on or ahead of schedule.

4. I understand that if I fall behind my pacing guide, it is my responsibility to ask my counselor or learning coach to request a deadline extension. **Failure to do so puts me at risk of being dropped from the class and/or receiving a failing grade.** *NOTE: Students more than 10 days behind on the pacing guide may be dropped from the course.*

5. I will not copy or plagiarize information from the internet, textbooks, other students or any other resource(s) in order to complete my assignments.

6. I understand that cheating and plagiarism are serious offenses and that my school will determine the consequences, which could include failing the course.

7. I will be courteous and respectful to my eteacher and other class members (follow the rules of netiquette) at all times.

9. I understand that my school or eteacher may contact my parent or guardian at any time if there are any concerns about my progress.

10. I understand that it is my responsibility to seek help when needed. If I do not understand a lesson resource or assignment, I should message my eteacher for further instructions and communicate with my learning coach.

11. I understand that I will receive zeros for any assignments that are not completed.

## Student Signature

I verify that I have read and agree to all the conditions as written above.

Signature: [Click here to enter text.](#)

Email address: [Click here to enter text.](#)

Phone number: [Click here to enter text.](#)

## Parent/Guardian Signature

By typing my name on the line below, I verify that I have read my student's contract as written above. Additionally, I understand that I must submit verification of my student's weekly fitness logs every few weeks as outlined in the schedule.

Signature: [Click here to enter text.](#)

Relationship to student: [Click here to enter text.](#)

Email address: [Click here to enter text.](#)

Phone number: [Click here to enter text.](#)