



Request to Enroll in MOCAP Virtual Courses for Blended Education Carl Junction School District

MOCAP is a program developed by the State of Missouri to offer students equal (online) access to a wide range of high-quality courses, flexibility in scheduling, and interactive online learning that is neither time nor place dependent.

The student and parent/guardian should complete this form and return it to your *building's principal* by the due date.
An application must be submitted each semester that virtual classes are requested in a Blended education plan.

The deadline for Spring 2023-24 requests for virtual blended enrollment is December 3.

Name of Student (Please Print): _____

Date of Request: _____

IEP: Y / N

504: Y / N

Explain reasons for requesting a MOCAP course:

In determining whether virtual instruction with a Blended format is in the best educational interest of a student, district staff will consider the following:

District Course Availability

1. If the course is offered onsite by the district, are there extenuating circumstances that make it difficult or impossible for the student to take the onsite course offered by the district?
2. If the course is offered onsite by the district and the student is able to take that course, what are the reasons the student wants to take the virtual course?

Virtual Course Characteristics

3. Does the course meet or exceed district curriculum standards and graduation requirements?
4. Does the course align with the student's career goals and the student's individual career and academic plan (ICAP)?
5. If the course is for remediation, will it personalize instruction to the student's specific needs?
6. Is the district aware of any complaints or concerns regarding the quality of the course, and have those complaints or concerns been resolved?
7. Has the district had difficulty working with the course instructor or provider to ensure a student with disabilities receives the required accommodations or modifications?

Student Skills Necessary for Success in Virtual Courses

8. Has the student demonstrated time-management skills that indicate that the student is capable of submitting assignments and completing course requirements without reminders?
9. Has the student demonstrated persistence in overcoming obstacles and a willingness to seek assistance when needed?
10. Has the student demonstrated verbal or written communication skills that would allow the student to succeed in an environment where the instructor may not have sufficient nonverbal cues to indicate the student's level of understanding?
11. Does the student have the necessary computer or technical skills to succeed in a virtual course?

Other Relevant Factors

12. Does the student have adequate access to computers, Internet, and other necessary technology resources to participate in a virtual course and complete assignments?
13. If the student has previously attempted a virtual course and struggled with or failed the class, have the issues that caused the student to struggle or fail been identified and addressed?

If district staff determines that virtual instruction is not in the best educational interest of a student, that decision will be documented in writing and provided to the student and the parents/guardians.

Students or parents/guardians who disagree with the district's determination about a MOCAP course can appeal the decision to the Board of Education and the Department of Elementary and Secondary Education (DESE). For all other district-approved virtual courses, students or parents may appeal the decision to the superintendent or designee and the superintendent or designee's decision will be final. In accordance with federal law, if a student receives special educational services, the student's individualized education program (IEP) team may determine that a virtual course is not appropriate for the student even if the course has otherwise been approved by the district.

Parent/student please initial ALL of the following to indicate you have read and understand:

- ____ ____ I understand my child continues to be a Carl Junction School District student and will continue to be subject to the same policies and procedures and state assessments.
- ____ ____ I understand that the Carl Junction School District is not required to provide access to computers, internet, or other necessary technology resources to students choosing to take a MOCAP course.
- ____ ____ I understand that Carl Junction School District is not required to provide a supervised location for students taking a MOCAP course to work on their course.
- ____ ____ I understand that in order to be successful in an online course, a student must have good computer skills, time-management skills, persistence, and good written communication skills.
- ____ ____ I understand that all Carl Junction School District online courses including MOCAP courses, follow the same school calendar as seated courses. Students enrolled in MOCAP courses are expected to complete all course requirements by the end of the semester as stated on the Carl Junction School District calendar.
- ____ ____ I understand that students who enroll in MOCAP courses are expected to actively participate in those courses with the goal of completing the course. If a student does not actively participate in a course or is not successful in a course, the district may remove the student from the MOCAP course and refuse to enroll the student in a MOCAP course in the future.
- ____ ____ I understand that while taking a MOCAP course, the virtual provider, not the Carl Junction School District, provides accommodations and modifications specified in the student's IEP or 504 plan and/or ELL support.
- ____ ____ I understand that the student is responsible for understanding how educational choices, including the decision to take a MOCAP course, may impact MSHSAA eligibility.

Student (Print & Sign Name): _____ Date: _____

Signature of Principal or Designee: _____ Date: _____

Complete this form if you are requesting to enroll in a Blended Program (part seated and part online) for Grades 6-8 only.

Proposed List of Virtual Courses and Seated Courses.	<u>Indicate either DESE approved online course provider OR CJ Schools</u>	Approved	Denied	Reason
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Signature of Principal or Designee: _____ Date: _____