



PITTSYLVANIA COUNTY SCHOOLS

P.O. Box 232 • 39 Bank Street S.E. • Chatham, Virginia 24531

Dr. Mark R. Jones
Division Superintendent

Pittsylvania County Schools' Virtual School Parent Agreement

Please complete, sign, and return with your enrollment form.

1. I accept the responsibility to supervise my child in using the Connections Learning curriculum. I understand that I am expected to become knowledgeable about the curriculum and Learning Management System (LMS).
2. I understand students must follow the Connections Learning student plan to demonstrate adequate academic achievement in the curriculum. Students must complete assignments at a level of 70 percent or better to move ahead in that subject area, and **spend a minimum of 20 hours per week on lessons.**
3. I understand that I may be asked to supplement the curriculum designed by Connections Learning with materials related to the Virginia Standards of Learning that will be provided by Pittsylvania County Schools.
4. I agree if my child is ill or away from his/her schoolwork for an extended period of time that I will contact a Pittsylvania County Schools' representative.
5. I understand if my telephone number, address, e-mail address, or my child's participation in the PCS Virtual School Program should change, I will inform a Pittsylvania County Schools' representative.
6. I understand enrollment in math, language arts, science, and / or history courses for grades 3-12 include full participation in all mandated state testing (Standards of Learning Tests, etc.) on the required date(s) and at the assigned location. *Participation in all review and benchmark testing sessions prior to the scheduled assessment will also be required of each student.*
7. I understand if my child is not making adequate progress, my child may receive a failing grade on his or her academic record, and may become ineligible to continue in the Virtual School program.
8. I agree to return any non-consumable items, books, and other materials when requested to the school division and / or Connections Learning at the end of the school year, course completion, or when my child withdraws from a course.
9. I understand that participation in the program requires that my child has regular, daily access to a computer with an Internet connection that meets the minimum standards as stipulated in the **Technology FAQs**. I acknowledge that I am responsible for the upkeep and maintenance of my personal computer, printer, working Internet connection, and any other operating system, browser, hardware and software required.

Acceptance of Agreement

I, _____, have read this agreement and agree to adhere to its terms. (Print Name)

Signature: _____ Date: _____



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