

Fall 2020 Intent Form

For planning purposes, we need to know which mode of instruction your child will be utilizing for the fall semester. Please choose **ONE** of the following options:

My student will attend classes **ON CAMPUS, 2 DAYS PER WEEK.**

My student will attend classes **ON CAMPUS, 4 DAYS PER WEEK.**

My student is a **DORM** student and will attend classes **ON CAMPUS, 4 DAYS PER WEEK.**

My student will remain **OFF CAMPUS** for **VIRTUAL LEARNING.**

As a reminder, **Fridays are Virtual Learning Days for ALL students.**

Student Name: _____

Grade: _____

Parent/Guardian E-Signature: _____

Date: _____