



Newark Community High School
District No. 18

413 CHICAGO RD., NEWARK, IL 60541
 PHONE (815) 695-5164
 FAX (815) 695-5752
Dr. Edward A. Boswell, Superintendent
James Still, Principal

REQUEST FOR FULL-TIME REMOTE LEARNING OPTION FOR SECOND SEMESTER 20-21
NON-MEDICAL REASON

***In order to be considered for remote instruction, this form must be submitted on or before**
Friday, March 12, 2021

In light of the COVID-19 pandemic, the District has developed a full-time remote learning option for all students. Any instructional days for approved full-time remote learning instruction will count as regular attendance days for the student. All approved requests for full-time remote instruction will apply for the duration of the 4th quarter without the option to request to transition to in-person instruction until the next quarter in the Fall. At the district's discretion, your child may be required to physically attend school if they choose to disengage or are unsuccessful in this Remote Learning opportunity.

Name of Student: _____ **Date of Birth:** _____

School: _____ **Grade Level:** _____

I, Parent/Guardian of the above-named student, acknowledge that I have reviewed the District's full-time remote learning plan for 4th Quarter and I request full-time remote learning instruction for my student for at least the next 9 weeks of the 2020/2021 school year because I do not wish my student to attend school in-person due to the COVID-19 pandemic.

Please return this completed form to the Mr. Jim Still, Principal or Dr. Edward Boswell, Superintendent. The District will review the information submitted and contact you regarding fall instruction, or for any additional information required to process this request.

 Signature of Parent/Guardian

 Date