



## Virtual Application - Elementary

The virtual program is an alternative method of learning for our Kanawha County students in grades K through 5. This option is available, but there is limited space. We have created this process to make the best selection based on the students' needs. Complete this application if you would like your child to be considered for the program. Once completed, return the application to the principal of your child's school via email or mail it to KCS Board Office at:

Kanawha County Board Office  
Attention: Valery Harper  
200 Elizabeth Street  
Charleston, WV 25311

Once received, the principal will finalize the application. The committee will review all applications and make determination of acceptance. Parents will be notified by email if approved or not. It is important to monitor your email while pursuing virtual admittance.

The application needs to be returned to your child's principal or the board office.

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

Parents name completing the application: \_\_\_\_\_

Parents email: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Age of child: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Do you currently have internet at your home (circle one):      YES                  NO

Who will be assisting your child with their schoolwork?

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Will the person who will be assisting your child be willing to sit down with him/her for at least 4 hours a day and be sure the child stays on pace (Circle one)?

YES

NO

What time frame will your child be working?

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Who will be supervising your child during the day?

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What experience does the person who will be assisting your child have with technology?

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What experience does your child have with technology?

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Does your child participate in any activities outside the home? If yes, please describe. If no, why?

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Why do you think your child will benefit from the program?

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Do you have any concerns about your child being in the virtual program?

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The virtual program is a new method of learning that requires more parental support and involvement. It is essential for parents/guardians to be willing to work and monitor their child's progress in order for him/her to be successful. In signing below, you are agreeing to this commitment and the information you provided above is accurate.

\_\_\_\_\_  
Parent/guardian Signature

\_\_\_\_\_  
Date

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Return this application to the building principal or to the board office. Do not complete or write  
in the section below.  
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### Principal Portion of the Application

Please review the parent's responses to the application. Is there anything you strongly agree or disagree with?

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Do you think the child will work and/or the parent will ensure the child works?

Yes

NO

Do you recommend this student for the virtual program (circle one):

YES

NO

For the question above, please describe why?

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Please provide the following information. This information does not prevent the child from being accepted into the program, but does assist the team with providing methods of support for the child.

Number of unexcused absences: \_\_\_\_\_

Number of wveys/dojo discipline incidents: \_\_\_\_\_

Does the student have a 504 or IEP? \_\_\_\_\_

Please attach the students' most recent DIBELS diagnostic and any math inventories used at your school.

Please return this application via email or pony to Valery Harper (vharper@mail.kana.k12.wv.us) or Stephanie Carter (slcarter@mail.kana.k12.wv.us) at the board office.

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date