



New Student Enrollment Application

Primary Parent

First	Last	Relation to student
<input type="text"/>	<input type="text"/>	<input type="text"/>
Primary Address	City, State, Zip	Parent Email
<input type="text"/>	<input type="text"/>	<input type="text"/>
Primary Phone	Alternate Phone	Preferred Method of Contact
<input type="text"/>	<input type="text"/>	<input type="text"/>

Secondary Parent

First	Last	Relation to student
<input type="text"/>	<input type="text"/>	<input type="text"/>
Primary Address - (Same as above?)	City, State, Zip	Parent Email
<input type="text"/>	<input type="text"/>	<input type="text"/>
Primary Phone	Alternate Phone	Preferred Method of Contact
<input type="text"/>	<input type="text"/>	<input type="text"/>

Student Info

First	Last	Middle
<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	Date of Birth	Student Email
<input type="text"/> M <input type="text"/> F	<input type="text"/>	<input type="text"/>
Student Phone	Is student hispanic? (Circle one)	What is the student's ethnicity?
<input type="text"/>	<input type="text"/> YES <input type="text"/> NO	<input type="text"/>
With whom does the student reside?		
<input type="text"/>		

Academic Info

Student's Full Name	What grade is the student entering?	Who will be the student's primary teacher?
<input type="text"/>	<input type="text"/>	<input type="text"/>
School most recently attended?	In what city was this school?	Last school year attending previous school?
<input type="text"/>	<input type="text"/>	<input type="text"/>
Does or did your student have an IEP for Special Education? If so, from what school?	Will your student be attending any class/course at another public school during the coming year? (If so, a dual enrollment form is required.)	Will your student also be enrolled with a private school during the coming year? (If so, please provide us with a copy of the class schedule.)
<input type="text"/>	YES NO	YES NO

The following are requirements of participation in the CyberLynx program:

- Keep CyberLynx informed as to enrollment status, change of address and / or any other change of situation.
- Follow procedures and policies as outlined in the CyberLynx Student Handbook.
- Kindergarten enrollees must be at least 5 years old by September 1.
- To be eligible for enrollment, a student must not be 20 years old on or before September 1.
- Special education students are eligible to enroll if it is determined by the IEP team that CyberLynx is the least restrictive environment and the student is not 22 years old on or before September 1.
- Meet State of Alaska and Nenana City School District graduation requirements if high school student plans to graduate from CyberLynx.
- All parents and students in correspondence programs have the same right to access the district appeal process as parents and students in other district programs (4 AAC 33.421). This includes, but is not limited to, special education (4 AAC 33.432). (Handbook for Appeal Process)
- All non-expendable materials remain the property of the school district and must be returned to the district (4 AAC 33.422). If student(s) withdraws from CyberLynx prior to November 1, all reimbursed funding and materials must be returned immediately; after November 1st all non-consumable materials must be returned to the district when the student exits the program for any reason.
- CyberLynx is required to annually administer the state assessments to every student in the tested grades (4 AAC 06.737), and we also recognize a parent's right to not have the parent's child participate in these assessments. Students who do not participate in testing will neither be barred from re-enrollment nor have their student accounts frozen.
- All expenditures related to the student must be directly tied to a specific course with a need addressed in the PER (ILP) (4 AAC 33.422). Submit reimbursements and/or orders only for materials and supplies related to my student's PER (ILP). Reimbursements/Orders cannot be religious or doctrinal in nature.
- Monthly contact with the parent/student is required (4 AAC 33.421).

Your signature indicates: you are aware of this information; you accept responsibility for ensuring your student is aware of their rights and requirements; you agree to all requirements; and you confirm that the information provided is true and accurate to the best of your knowledge.

Parent/Guardian/Adult Student Signature

Date