



Bartow Senior High School

"Home of Champions"
1270 South Broadway
Bartow, Florida 33830
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Date _____

I, _____, the parent of _____, have requested that he/she be placed into a Florida Virtual/Polk Virtual School for the following class _____ . I understand the following issues and have been advised of the possible ramifications of this choice:

1. My student is **REQUIRED** to complete this course for graduation.
2. If this course is not completed before graduation my student may not be allowed to graduate (if a required course) and participate in graduation activities and ceremonies.
3. He/She will be put into the course at the beginning of second semester if adequate progress is not being maintained.
4. He/She will be dropped by the FLVS or PVS if appropriate pace is not being maintained, losing the right to take the course.

After being advised of these possible issues, I still choose to place him/her in a FLVS or PVS course.

Sincerely,

Parent

Student

Guidance Counselor

Ron Pritchard, Principal