

1591 N Jordan Ave, Provo, UT 84604 (801) 374 – 4810 Mon-Fri 8 am-4 pm

Secondary Enrollment Application

Student Name:								
Grade:	rade: Date of Birth:							
Campus/Boundary Sch	ool:							
Student's email address	S:							
Home Phone:	Cell	1:	_					
Address:	City:	: Zip:						
Gender: □ Male □ F	emale Stable Internet an	nd Computer Access: □Y□N						
Please check if any of t ☐ IEP If yes, case mana	he following apply: ger name:	□ 504 □ Fee Waiver □	NCAA					
	/African American ☐ White n/Alaskan Native (Tribe:	□ Native Hawaiian/Pacific Islander □ Hispanic	ſ					
Reason for taking onlin	e course:							
Credit Recovery	Dual enrollment	Early Graduation Track						
Parent/Guardian Name	:	Phone:	_					
Email:								
Please initial	eSchool Pobelow to show your understand	rolicies and agreement to eSchool Policies	es:					
I understand that any II boundary school or Provo Sch	*	School students will be met and maintained thr	ough the					
	d schools. Students who are 2 weeks	the course and failure to complete assignments is or more than 10% behind will be marked ab						

I understand that plagiarism an	d chea	iting o	f any	kind (could	result in	terminatio	n from e	Sch	ool class	es.		
I understand that the average so	emeste	er coui	rse tak	es 90	hour	s to comp	olete but th	nat all co	urse	s must be	e complete	by the	
I understand that completion of receive full credit.	f all as	signm	ents a	ınd qu	iizzes	in a sem	ester cours	se and a	proc	tored fin	al are requ	aired to	
I understand that I have 10 sch that credit. If I do not finish the course							a course. A	After 10	days	, I am re	sponsible	to earn	
I understand that I must log into	my c	ourses	at lea	st one	ce eve	ery 10 da	ys, or I wil	l be drop	ped	from my	courses.		
I understand that the end date f the semester. First semester ends Janu		-			_	-			_		s the last o	lay of	
SEMESTER 1				En	ollr	nent							
Course Name	Qua	rters	or Ser	neste	rs			Credit Recovery?			Provider		
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
SEMESTER 2	•												
Course Name	ourse Name Quarters or Semesters						Credit Recovery?			Provider			
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
	Q1	Q2	Q3	Q4	OR	Sem 1	Sem 2	Yes	/	No	BYU IS	Edgenuity	JET
Student Signature							Dat	e					
Parent Signature							Dat	e					
Counselor Signature							Dat	e					
Case manager Signature (if neces	sary)_						Dat	e					
		F(OR OF	FICE	USE	ONLY							
Enrolled:													
	Da						By:						
BYU	Da						By:						
BYU Edgenuity	Da						By:						
BYU							By:						