

# PARENT SELECTION OF REMOTE LEARNING

For Start of the 2020-2021 School Year

**Please complete 1 form for each child for whom you are making a request**

Date of Request: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Student's Date of Birth: \_\_\_\_\_

Student's Grade: \_\_\_\_\_

Students receiving instruction on a full remote platform will follow the school's bell and class schedule so as to receive live, synchronous instruction. Please know the bell and class schedules are subject to change as needed in accordance with the district's reentry plan.

In order for your child to commence the school year with remote learning, your completed request must be submitted to Mr. Alberta, Principal, by August 6, 2020. If your request is received after that date, the school district may require a period of at least thirty (30) calendar days to process your request as it may necessitate a change in instructional staff and instructional support, educational technology, and/or student schedule. If additional time is required before your child can start remote learning or can return to the classroom, you will be contacted by Mr. Alberta or his designee.

Please answer the following questions regarding your request for remote instruction for your child. Questions regarding remote learning may be directed to Mr. Alberta, Principal, by email at [malberta@rochellepark.org](mailto:malberta@rochellepark.org), or telephone at 201-843-3120 ext. 510.

Please be sure to provide your contact information below in the event that additional information is needed and so you may be kept informed on the status of your child's transition to/from remote learning.

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_ home: \_\_\_\_\_ cell: \_\_\_\_\_

Email: \_\_\_\_\_

Please indicate the dates you are requesting to begin and end remote learning:

Student's date to begin placement on full remote learning platform: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month/Day/Year

Student's date to return to the classroom, ending full remote learning platform: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Month/Day/Year

Please indicate the following regarding internet access and/or WiFi connectivity:

\_\_\_ My child will have internet access and/or WiFi sufficient to receive remote instruction.

\_\_\_ My child will NOT have internet access and/or WiFi sufficient to receive remote instruction.

\_\_\_ I am unsure if my internet access and/or WiFi is sufficient to receive remote instruction. Please have a school representative contact me.