

MILBURN ONLINE ENROLLMENT AGREEMENT / APPLICATION Date: _____

To submit this enrollment agreement by mail, please complete all pages and send to:

**Richard Milburn High School
3460 Commission Ct., Ste 200
Woodbridge, VA 22192**

Or Fax to: (703) 494-6093, ATTN: Barbara Tamez

Student: Last: _____ First: _____ Middle: _____

SSN: _____ DOB(mm/dd/yyyy): _____ Gender: _____

Email Address: _____

Street: _____ Telephone: _____

City: _____ State: _____ Country: _____ Zip: _____

Check one of the following:

- Transfer credits back to my local high school
 Apply credits towards RMHS diploma

From the WISE course descriptions in your catalog, please select the correct information in the section below and fill in the correct tuition:

Course Name	Course Number	Tuition

SUBTOTAL	
TOTAL	

Tuition Fees: \$400.00 per credit (includes text and materials)

If you enroll in a course with us and then decide that you do not wish to take classes, the following refund policy applies:

RMHS will issue a **full refund** of tuition if the school is notified of the student's decision to cancel their enrollment **within the first 5 days** after enrolling in the course. The cancellation request may be conveyed in any way, such as by telephone, fax, email, or by letter. If notification of cancellation occurs after 5 days of enrolling in the course RMHS is entitled to a **nonrefundable fee** of \$75.00 to handle administrative costs. Students requesting cancellation after the first five days of enrolling in a course are entitled to the amounts shown in the chart below.

Published Length of Course	Refundable Tuition Due after-
8 weeks	1 st week-80% 2 nd week-60% 3 rd week-40% 4 th week-20% 5 th week-0%

ENROLLMENT TERMS AND CONDITIONS FOR THE INTERNET DELIVERED WISE PROGRAM FOR RICHARD MILBURN HIGH SCHOOL

An Internet delivered program is an alternative method of completing course requirements. Internet courses may or may not be the best alternative for the student. Students should be self motivated and disciplined to successfully complete an Internet delivered course. Coordination with the permanent school counselor is required, if applicable, prior to enrollment in any Internet course.

Students are not required to attend regularly scheduled class periods; however, this does not imply that the course requirements are less stringent than those found in traditional classrooms. Students are required to complete course assignments, participation requirements, projects and tests and quizzes in an orderly and consistent manner as prescribed in the course syllabus within a certain time period. Course offered aligned to the Standards of Learning (SOL) in Virginia and taught by certified teachers.

Students not meeting course requirements will not receive a passing grade.

In order to enroll in an Internet delivered course the student and parent or guardian must agree to the following **Code of Honor**.

1. All coursework submitted will be the student's own work. The student will receive no outside help on assignments.
2. Exams, tests, quizzes or other assignments noted by the teacher as requiring a proctor would be monitored by an adult 21 years of age or older. The adult's name and relationship to the student, if any, will be specified prior to school approval as a designated proctor for required exams. Arrangements should be made with the teacher to schedule exam times.
3. The Proctor will receive the password for the student to access the exam. The proctor will remain in the room with the student during the exam.
4. After completion of the on-line final exam the proctor shall send an email with an electronic signature and the following statement.

(Student's name) is taking an exam under my supervision on (date) and (time). Upon completion of the exam, it was submitted electronically.

At no time did the student receive outside help to complete exam or use any course materials unless the teacher in the directions for completing the exam specified the use of course materials.

Signed by proctor and dated.

I agree to abide by the terms and conditions set forth in this document.

_____ Student Signature

_____ Date

_____ Parent/Guardian Signature

_____ Date

_____ RMHS Signature

_____ Date

Local School Approval {If Applicable}

Name _____ Signature _____
Title _____ School Name _____
Street _____ City _____
Zip _____ State/County _____
Fax _____ Telephone _____
E-mail _____

Student Record Release Authorization

Students under the age of 18 require the written permission from their legal guardian or by the student if age 18 or over prior to providing official record information to any persons, school or agency other than the parent/legal guardian or the student's approved supervisor of record. This permission may be granted by completing and returning the following Authorization Form or by letter (all info must be included) or by returning the Authorization Form completed by the student's supervisor of record.

I, _____ authorize the RMHS education personnel to release the grades of _____ by phone, fax or mail to the principal or counselor of _____ (name, address, telephone and/fax of school) and/or to _____ (name, address, telephone and/fax of individual or agency).

Signature- _____ Relationship to student- _____

Payment Information

Payment made by _____ Telephone _____ Fax _____

Address _____ City _____ State/Country _____ Zip _____

Check or money order enclosed (payable to RMHS-WISE)

Other

Charge to my (circle one)

MasterCard

VISA

Card Number _____ Expiration Date _____

Print Name as shown on card _____

Signature as shown on card _____

I, _____ agree to the terms in the WISE Enrollment Agreement as indicated by my signature below. RMHS may stamp this form upon receipt.

Signature of Student

Date