



Colorado Virtual Academy  
11990 Grant Street, Suite 402  
Northglenn, CO 80233

Ph. 866.339.6816  
Fx. 303.255.7044  
[www.covcs.org](http://www.covcs.org)

## Additional Required Documentation

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### Part 1: (The pages supplied in this packet)

- Out-of-District Waiver (For all students who do not reside in Adams County District 12)
- Release of Student Records
- Family Data Survey for Alternate Program Funding/Eligibility
- Internet Use Agreement

### Part 2: (Items you will need to supply)

Before you send in your enrollment packet, please be sure you have completed and included copies (do not include originals) of the following:

- Proof of age for each student applying to our program (copy of state certified Birth Certificate, Passport, or Colorado State ID)
- Current proof of residency (copy of current utility bill, tax bill, or mortgage bill)
- A copy of your student's complete semester report card from the 2007-2008 school year (except students under 7 on 10-1-08)
- A copy of your student's Special ED records, literacy plan, 504, or IEP, if applicable
- A copy of your student's Immunization Record or a signed exemption waiver. For more information about required immunizations go to <http://www.cdphe.state.co.us/dc/Immunization/Forms/CARD-certofimm.pdf>
- A copy of your student's CSAP results (if applicable)
- Transcripts (for high school students)

Other Additional Documentation (if necessary):

- Change of student legal name documentation
- Restraining orders
- Legal custody documents (if parents are legally separated or divorced)

Fax or mail the required documents listed in both parts 1 and 2 to COVA. The fax number for COVA is 1-303-255-7044. If you are unable to fax, please mail the documents to:

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## Out-of-District Waiver

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Please complete one form for each student to be admitted to COVA. Note: This form must be completed and signed for students who reside outside of Adams County School District 12.

Student's Name: \_\_\_\_\_  
last first middle

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

Parent/Guardian's Address:

\_\_\_\_\_ street apt #

\_\_\_\_\_ city county state zip

Please accept this waiver as my confirmation that enrollment in the Colorado Virtual Academy, a charter school in Adams County District 12, does not entitle my student to attend any other Adams County District 12 schools due to withdrawal or expulsion. I specifically waive any such right.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name:	Student's Home Phone:	1
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**COLORADO**  
VIRTUAL ACADEMY<sup>SM</sup>

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## Release of Student Records

Please accept this document as formal approval for the release of all official school records (including the record of transcripts, testing information, special education, health and immunization records).

### Student Information

Student's Legal Name: \_\_\_\_\_  
first middle last

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

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

### Prior School Information

Name of Prior School: \_\_\_\_\_

Name of Prior School District: \_\_\_\_\_

School's Address: \_\_\_\_\_  
street

\_\_\_\_\_ city \_\_\_\_\_ county \_\_\_\_\_ state \_\_\_\_\_ zip

School's Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Name of Parent or Legal Guardian: \_\_\_\_\_  
first last

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* January 1978: Federal Law 99.31 " No parent signature required for educational records sent to another agency."

#### SCHOOL OFFICIALS ONLY:

Send student records to: Colorado Virtual Academy  
11990 Grant Street, Suite 402  
Northglenn, CO 80233  
fax: 303-255-7044

Student's Name: \_\_\_\_\_ Student's Home Phone: \_\_\_\_\_



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## 2008–2009 Family Data Survey for Alternate Program Funding/Eligibility

Please complete a separate survey for each of your children attending this school. Complete the information, sign your name, and return survey to the school. Completion of this survey is voluntary, but may assist the school in receiving additional state/federal funding, or other benefits for your student. Detailed instructions can be found on the back of this document.

last name(s) of family

mailing address, city, zip code

telephone number

### Student Information (PARTS I–III)

Please print the child's name, school, and grade. Use a separate survey for each child.

PART I – Student's Legal Name: \_\_\_\_\_  
last first middle

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

PART II – Food Stamp Case Number: \_\_\_\_\_ (Do not list the 16-digit Quest number)

If you listed a Food Stamp Case Number, please skip to PART V – Signature.

PART III – Foster Child:  (If YES, check here.)

If this is a child who is the legal responsibility of a welfare agency or court, list the amount of the child's personal use monthly income:

\$ \_\_\_\_\_ (Write "0" if the child has no personal use income); please skip to PART V – Signature.

### PART IV – Total Income from Last Month

List everyone in the household not listed under PART I – Student Information.

Name	LIST LAST MONTH'S GROSS MONTHLY INCOME				
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security	Other	
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>
	\$	\$	\$	\$	<input type="checkbox"/>

### PART V – Signature (An adult household member must sign this survey.)

I certify (promise) that all information on this application is true and that all income is reported. I understand that the school may get state or federal funds based on the information I give. I understand that school officials may verify (check) the information.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

#### FOR SCHOOL USE ONLY

(Monthly Income Conversion: Weekly = x 4.33; Every 2 weeks = x 2.15; and Twice a Month = x 2)

Monthly Income: \_\_\_\_\_ Household Size: \_\_\_\_\_ FS: \_\_\_\_\_ Date Withdrawn: \_\_\_\_\_

Eligibility:  Yes (type: \_\_\_ )  No  Declined survey

Determining Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name:

Student's Home Phone:

## Instructions

This survey is used by the Adams County School District to maximize available funding from state and federal sources, as well as to provide certain other benefits that may be available for your child. In many cases, the eligibility for these funds and programs is linked to whether or not your child is currently eligible for free or reduced price meals in the federal School Lunch (and Breakfast) programs.

Colorado Virtual Academy does not participate in the federal School Lunch or Breakfast programs; for that reason, we are asking that you complete the attached survey as an alternate means of qualifying your child's school for state and federal programs that will provide much-needed funding. Additionally, this may also qualify your child for certain other benefits. (optional: describe)

Use the following guidelines to complete one survey for each child you have at this school:

If your household gets FOOD STAMPS, follow these instructions:

Part 1: List your child's name, school, and grade.

Part 2: List your Food Stamp case number (not your Quest Card number).

Part 3: Skip this part.

Part 4: Skip this part.

Part 5: Sign the form.

If your child is a FOSTER CHILD, follow these instructions:

Part 1: List the child's name, school, and grade.

Part 2: Skip this part.

Part 3: List the child's personal use monthly income, if any.

Part 4: Skip this part.

Part 5: Sign the form.

ALL OTHER HOUSEHOLDS follow these instructions:

Part 1: List child's name, school, and grade.

Part 2: Skip this part.

Part 3: Skip this part.

Part 4: Follow these instructions to report total household income from last month.

Column 1 – Name: List the first and last name of each person living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children not listed in Part 1. Attach another sheet of paper if you need to.

Column 2 – Last month's income and how often it was received: List the types of income the person got last month and how often he/she got it. Employment income: List the gross income each person earned last month. It is not the same as take-home pay. Gross income is the amount earned before taxes and deductions. It should be listed on the pay stub, or the boss can tell you. Next to the amount, write how often the person got it (weekly, every other week, twice a month, or monthly). Other Income: List the total amount each person got last month from all other sources. Include welfare, child support, alimony, pensions, retirement, Social Security, Worker's Compensation, unemployment, strike benefits, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), disability benefits, regular contributions from people who do not live in your household, and ANY OTHER INCOME. Report net income for self-owned business, farm, or rental income. Next to the amount, write how often the person got it.

Column 3 – Check if no income: If the person does not have any income, check the box.

### INCOME TO REPORT:

Earnings from work security:

- Wages/salaries/tips
- Strike benefits
- Unemployment Compensation
- Worker's Compensation
- Net income from self-owned business or farm

Pensions/Retirements/Social Security:

- Pensions
- Supplemental Security income
- Retirement income
- Veteran's payments
- Social Security

Welfare/Child Support/Alimony:

- Public assistance/welfare payments
- Alimony/child support payments

Other Income:

- Disability benefits
- Interest dividends
- Cash withdrawn from savings
- Estate/trusts/investments
- Regular contributions from person(s) not living in household
- Net royalties/annuities/net rental income
- Any other income

Student's Name:

Student's Home Phone:



# Internet Use Agreement

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## INTERNET USE AGREEMENT

### Introduction

We are pleased to offer students of Colorado Virtual Academy access to computer network resources, electronic mail and the Internet. To use these resources, all students must sign and return this form, and those under age 18 must obtain parental permission. Parents, please read and complete this document carefully, review its contents with your son/daughter, and sign and initial where appropriate.

### General Network Use

The network is provided for students to conduct research, complete assignments, and communicate with others. Access to network services is given to students who agree to act in a considerate and responsible manner. Students are responsible for good behavior on school computer networks just as they are in a classroom or a school setting. Access is a privilege - not a right. As such, general school rules for behavior and communications apply and users must comply with standards and honor the agreements they have signed. Beyond the clarification of such standards, COVA is not responsible for restricting, monitoring or controlling the communication of individuals utilizing the network.

Network storage areas may be treated like school lockers. Network administrators may review files and communications to maintain system integrity and insure that users are using the system responsibly. Users should not expect that files stored on district servers will always be private.

### Internet / World Wide Web / E-mail Access

Access to the Internet and e-mail will enable students to use thousands of libraries and databases. Within reason, freedom of speech and access to information will be honored. Families should be warned that some material accessible via the Internet might contain items that are illegal, defamatory, inaccurate or potentially offensive to some people. While our intent is to make Internet access available to further educational goals and objectives, students may find ways to access other materials as well. Filtering software is in use, but no filtering system is capable of blocking 100% of the inappropriate material available on the Internet. We believe that the benefits to students from access to the Internet, in the form of information resources and opportunities for collaboration, exceed any disadvantages. Ultimately, parents and guardians of minors are responsible for setting and conveying the standards that their children should follow when using media and information sources.

### Publishing to the World Wide Web

Parents, your daughter or son's work may be considered for publication on the World Wide Web, specifically on his/her school's web site. Such publishing requires parent/guardian permission (see over). The work will appear with a copyright notice prohibiting the copying of such work without express written permission. In the event anyone requests such permission, those requests will be forwarded to the student's parent/guardian.

Unidentified photos of students may be published on school websites, illustrating student projects and achievements. In addition, your daughter or son's full name may be considered for publication on his/her school's web site. If published, his/her name will appear on pages with a clear school related purpose and will be included to further instructional and/or co-curricular activities. Permission for such publishing does not grant permission to share any other information about your son/daughter, beyond that implied by their inclusion on the web page(s). If you do not want your child's photo or name to be published on the website, please indicate this on the Release of Information form (Photo/Video Release portion), which can be found included in your enrollment packet.

To use networked resources, all students must sign and return this form, and those under age 18 must obtain parental permission. The activities listed below are not permitted:

- Sending or displaying offensive messages or pictures
- Using obscene language
- Giving personal information, such as complete name, phone number, address or identifiable photo, without permission from teacher and parent or guardian
- Harassing, insulting or attacking others
- Damaging or modifying computers, computer systems or computer networks
- Violating copyright laws
- Using others' passwords
- Trespassing in others' folders, work or files
- Intentionally wasting limited resources
- Employing the network for commercial purposes, financial gain, or fraud

Student's Name:

Student's Home Phone:

-Employing the network for commercial purposes, financial gain, or fraud

Violations may result in a loss of access as well as other disciplinary or legal action.

Student User Agreement:

As a user of the Colorado Virtual Academy/K12, Inc. computer network, I hereby agree to comply with the statements and expectations outlined in this document and to honor all relevant laws and restrictions.

(Initial appropriate items)

\_\_\_\_\_ I agree to use the network responsibly

\_\_\_\_\_ I grant permission to have my materials published to the World Wide Web

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Permission:

All students are provided with access to school computer resources. In addition to accessing our computer network, as the parent or legal guardian, I grant permission for the above named student to:

(Initial appropriate items)

\_\_\_\_\_ access the Internet and e-mail systems

\_\_\_\_\_ have his/her materials published to the World Wide Web

These permissions are granted for an indefinite period of time, unless otherwise requested. I understand that individuals and families may be held liable for violations. I understand that some materials on the Internet may be objectionable, but I accept responsibility for guidance of Internet use - setting and conveying standards for my daughter or son to follow when selecting, sharing or exploring information and media.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Student's Home Phone: \_\_\_\_\_