



Application

School Year: 20__-20__

Contact #1

Parent/Guardian Name (Please Print) _____

Email _____

Phone _____

Address _____

City, Zip _____

Contact #2 (Required)

Parent/Guardian/Emergency Contact Name (Please Print) _____

Email _____

Phone _____

Address _____

City, Zip _____

Resident District Name: _____

Are there any **custody issues** that we need to be aware of? Yes No (Please attach legal paperwork if you checked Yes.)

Student Information

	First Name	Middle Name	Last Name	M/F	Birthdate	Age (on 9/15)	Grade (year applying for)
1)							
Last School Attended:		City:		State:		Year:	
Does your child currently have a...		• 504 Plan: <input type="checkbox"/> Yes <input type="checkbox"/> No		• IEP: <input type="checkbox"/> Yes <input type="checkbox"/> No			
My child plans to dual enroll on District Registration for: <input type="checkbox"/> Academics <input type="checkbox"/> Extracurricular Activities <input type="checkbox"/> Special Education							
2)							
Last School Attended:		City:		State:		Year:	
Does your child currently have a...		• 504 Plan: <input type="checkbox"/> Yes <input type="checkbox"/> No		• IEP: <input type="checkbox"/> Yes <input type="checkbox"/> No			
My child plans to dual enroll on District Registration for: <input type="checkbox"/> Academics <input type="checkbox"/> Extracurricular Activities <input type="checkbox"/> Special Education							
3)							
Last School Attended:		City:		State:		Year:	
Does your child currently have a...		• 504 Plan: <input type="checkbox"/> Yes <input type="checkbox"/> No		• IEP: <input type="checkbox"/> Yes <input type="checkbox"/> No			
My child plans to dual enroll on District Registration for: <input type="checkbox"/> Academics <input type="checkbox"/> Extracurricular Activities <input type="checkbox"/> Special Education							
4)							
Last School Attended:		City:		State:		Year:	
Does your child currently have a...		• 504 Plan: <input type="checkbox"/> Yes <input type="checkbox"/> No		• IEP: <input type="checkbox"/> Yes <input type="checkbox"/> No			
My child plans to dual enroll on District Registration for: <input type="checkbox"/> Academics <input type="checkbox"/> Extracurricular Activities <input type="checkbox"/> Special Education							
5)							
Last School Attended:		City:		State:		Year:	
Does your child currently have a...		• 504 Plan: <input type="checkbox"/> Yes <input type="checkbox"/> No		• IEP: <input type="checkbox"/> Yes <input type="checkbox"/> No			
My child plans to dual enroll on District Registration for: <input type="checkbox"/> Academics <input type="checkbox"/> Extracurricular Activities <input type="checkbox"/> Special Education							

I have read and agreed to the Program Expectations on page 2 of this form. Yes



Program Expectations

Your supervising teacher will expect the following from you:

- **Determine the educational goals for your child(ren).**

Certainly, the teacher can assist in this process, but the responsibility rests with the parent. The supervising teacher will expect the parent to communicate these goals at the first meeting of the school year.

- **Select and purchase educational materials in line with your goals.**

MHSAP has a limited amount of curriculum materials that are available for long-term checkout through our resource library. Beyond what we currently have available the parent is responsible to provide all curriculum materials.

- **Provide the direct instruction necessary to achieve your educational goals.**

- **Inform the supervising teacher of your need for assistance.**

- **Monitor the student's progress and provide evidence to the supervising teacher that demonstrates the progress made.**

- **Determine the credits earned and assign grades as needed.**

Parents of high school students must develop a four-year plan to acquire the necessary credits to meet graduation requirements. On a quarterly basis throughout high school, the parent must provide evidence of credit completion to the supervising teacher, if participating in the MHSAP diploma program.

- **Promptly return phone calls, e-mails, and letters from the teacher and keep scheduled appointments.** Parents not returning communication from their supervising teacher, resulting in insufficient contact requirements, risk being dropped from the program.

District Registration

MHSAP is part of the Marion Independent School District (MISD) so all families must complete the District's Registration online through [PowerSchool](#) for each of their MHSAP students yearly to complete their MHSAP Registration.

Dual Enrollment

Dual Enrollment refers to a student who desires to participate in classes or activities at a Marion public school, at a local college, or a student with an IEP being served by a Marion public school teacher. Learn more at: [Who Should Dual Enroll](#) (<https://tinyurl.com/DualEnrollOptions>).