



ONLINE LEARNING SERVICES
2800 Kettering Drive
Waterford, Michigan 48329
www.waterford.k12.mi.us/cyberacademy

JEFF FRANKOWIAK
PRINCIPAL
WATERFORD ONLINE LEARNING

PHONE: (248) 706-4871
FAX: (248) 673-1084
E-MAIL: FRANKJ02@WSDMI.ORG

Waterford School District
Seat Time Waiver Application Letter

Dear Parent/Guardian:

The Waterford School District is proud to have the opportunity to provide off-site virtual learning for students through the Waterford School District, state approved seat time waiver program. Students approved for a seat time waiver are expected to work every day on school work, the same as if in a building classroom. Students must also comply with state requirements including making weekly mentor contact, showing weekly progress on courses and achievement in academics.

Attached please find the application with a detailed checklist of items that should be included. You may scan and email the application to banksk01@wsdmi.org, send it by U.S. Postal Service, or hand-deliver it to Waterford Kettering. Please be sure to use the checklist of required information on the next page as **no incomplete applications can be submitted for review.**

After the application has been processed and reviewed, you will receive notification of acceptance or disapproval to the Cyber Academy or seat time waiver program. If accepted, you will be given instructions for enrolling your child in the district, if not a district resident, and the Cyber Academy. Please allow 10 school days upon receipt of a fully completed application packet to process

If you have any questions regarding the application, please do not hesitate to contact the office at the number listed above.

Sincerely,

Jeff Frankowiak, Principal



ONLINE LEARNING SERVICES
2800 Kettering Drive
Waterford, Michigan 48329
Phone: 248.706.4871
Fax: 248.494.9497

Waterford Cyber Academy Application Checklist

- Please make sure all the documentation listed below is included in your application and returned to the address above or email to banksk01@wsdmi.org
- **No incomplete applications will be processed.** Make sure all the blanks are filled in correctly and *call if you have any questions.*
- **Grade refers to the student's year in school and not credit standing.** A student could be a junior, but only have credits for a freshman. We consider them a junior.
- **This is an application with an approval process.** Submitting an application does not mean that the student is automatically accepted.
- Applications for **Out of District** students can only be accepted during open enrollment and are only eligible to apply to attend the Cyber Academy program. Applications accepted before or after the open enrollment period will be refused.
- **Out of District** students that are accepted are enrolled as Cyber Academy students only, this does not grant enrollment of the student or siblings into any other school within the district.

Please make sure all of the following are included in your application:

- Page 3: Application filled out completely and signed with documentation for all checked boxes that are starred under *Reasons for Application.*
- Pages 4-5: Student Contract read, signed, and dated by student and parent
- Page 6: Essay **hand written** by student as directed and signed
- Pages 7-9: Online Readiness Assessment completed by student
- High School Students - Transcript
- Seat Time Waiver Reference Form (Required by in district students only)
- Attendance record
- If applying while school is in session: please include school documentation listing current grades—progress report or current report card
- Optional: Any other documentation you feel would help determining eligibility; personal letter, letter from school or counselor, MEAP, ACT, SAT, M-Step, or standardized test scores

Information for Waterford Students applying for a seat time waiver position through current his/her high school:

- The application can take up to 10 school days upon receipt of a fully completed application to be reviewed with a determination
- If not suspended or expelled, the student is expected to continue his/her regular attendance during the school year until notification of acceptance is received from our office.
- If accepted, the student will remain on his/her school roster regardless of the number of courses taken through our program



Waterford Cyber Academy Application

TYPE OF WAIVER APPLYING FOR: ___ School of Choice* ___ School of Selection**

*School of Choice is for non-residents of Waterford to attend the Cyber Academy Only. Successful candidates are enrolled at beginning of the semester only. ** School of Selection is for students who are currently enrolled or reside with the Waterford School District

Current WSD students ONLY applying for Cyber Academy please mark home school below:

Student ID #: _____ School: ___ Durant ___ Kettering ___ Mott ___ Mason ___ Pierce

STUDENT NAME _____
(Last) (First) (Middle)

Grade Entering/Entered in the Fall: _____ Current School/District: _____

Gender: ___ Male ___ Female Birth Date: _____

Student Phone: _____ Student Email _____ @ _____

Street Address _____ Apt # _____

City, State _____ Zip Code _____

Parent/Guardian _____ Parent Phone _____

Parent Work Phone _____ Parent Email: _____ @ _____

Does the student have a current 504* Plan? ___ Yes ___ No (if yes please attach)

Does the student have a current IEP* for an educational disability? ___ Yes ___ No

If yes, date of last IEP (please attach a copy) _____

Current number of credits: _____ GPA: _____ Anticipated Year of Graduation: _____

Reason for application – check all that apply

- Accelerated learning Court Issues Elite Athlete Expelled* Failure/loss of credits
- Homebound* Home Schooled Hospitalization* Inconsistent attendance
- Learning style preferences Long Term suspension* Pregnant or teen parent
- Social/emotional* other* _____

***Please attach background information supporting the request. The supporting documentation can be from a counselor, staff member, parent, student, and/or suspension or expulsion letter.**

By signing below I certify all of the information provided above to be true and I acknowledge and accept the policies and stipulations of the Waterford School District Seat Time Waiver program. I understand untrue or incomplete information will disqualify and remove the applicant from Waterford School District programs.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

Office Use Only

Approved _____ Date _____ STW _____ Cyber Academy _____

Denied _____ Date _____

Jeff Frankowiak, Principal



ONLINE LEARNING SERVICES
2800 Kettering Drive
Waterford, Michigan 48329
Phone: 248.706.4871
Fax: 248.494.9497

Waterford Cyber Academy/Building Seat Time Waiver Contract

Student _____ Birth Date _____

I, _____ understand and will abide by the following requirements to be and remain a Seat Time Waiver Student in good standing.

1. It is a privilege to participate in the program and, therefore, I am expected to adhere to the highest codes of conduct and integrity.
2. I will abide by the district's Internet Acceptable Use Policy (AUP) and Code of Conduct.
3. I must be in attendance on count days as directed.
4. I must be in attendance for new student orientation before classes start.
5. I must maintain a minimum of weekly contact with my mentor at a mutually agreeable time and avenue (email, phone, in person). If email, I will include what I have accomplished, what I am learning, or as directed by my mentor. The contact will be adjusted, if warranted.
6. I understand that weekly contact is mandatory. Not maintaining weekly mentor contact could be grounds for removal from the program.
7. Course work must be completed in accordance to the Waterford School District semester deadline dates or course deadline dates stated; the districts policies will take precedence in meeting program requirements as dictated by the Department of Education.
8. I understand that my mentor has access to monitor and review my progress on coursework.
9. I must show that I am working daily on courses with an average of 5 hours per week per course AND/OR meeting the deadlines established by the cyber teachers and/or mentor.
10. I must show success in academics to remain a Seat Time Waiver student.
11. It is my responsibility to have the use of a computer connected to high speed internet and make arrangements to work on another computer if my computer is not working.
12. I agree to make arrangements to take any state testing in a Waterford School District building, including M-Step, SAT/MME or others as required by the State of Michigan. *
13. I understand that the courses with appropriate earned grades will be on my transcript. The grades earned will be a part of my permanent record and will be included in my cumulative Grade Point Average (GPA).
14. I reside in the county of: (Please circle) Oakland Lapeer Genesee Livingston Washtenaw Wayne Macomb
15. If the number of applicants exceeds the number of spaces available, the District will use a random draw to select applicants.
16. Falsification of requested information may disqualify applicant from being considered for admission.

Consequences for violations:

- **1st Offense:** A verbal warning with parent contact.
- **2nd Offense:** Notification in writing of academic probation to the parent and Academy Coordinator
- **3rd Offense:** Written notice sent to Director. Student could be removed from the program.
- **Severe Misconduct:** Regardless of whether the offense is a first time offense, student will be removed from the course[s] and/or program with failing grades.

Signatures:

Student: I have read and understand all the expectations and the policies set forth in this document. I agree to abide by all the guidelines stated.

Student Signature

Date

Parent/Guardian: I have read and understand the above stated guidelines and expectations for my child. I understand that participation in my child’s education is an important factor in his/her educational success. I agree to monitor my child’s progress at least weekly online and be accessible to discuss my child’s progress and development with the mentor. I will make sure to notify the school at the earliest possible time if there is a telephone number or address change. I understand that time management and attendance is vital to my student’s success and I am a part of that success. My child will be required to abide by all the guidelines stipulated in this contract in order to remain a seat time waiver student. Failure to follow these guidelines and policies may result in release from the program.

Parent/Guardian Signature

Date



ONLINE LEARNING SERVICES

2800 Kettering Drive
Waterford, Michigan 48329
Phone: 248.706.4871
Fax: 248.494.9497

Waterford Cyber Academy/Building Seat Time Waiver
Student Essay

Student _____ Date _____

THE **STUDENT** MUST **HAND WRITE** THIS ESSAY.

Please write an essay as to why you should be considered for the Waterford School District seat time waiver program for online learning. Include answers to:

1. What interests you about the seat time waiver program? Why do you want to do online learning?
2. What do you hope to get out of this program besides the curriculum?
3. How do you currently stay organized and handle time management with daily activities and assignments as well as keep track of due dates and appointments?
4. What has occurred in your life to cause you to apply for online learning?

Signed _____ Birth Date _____



ONLINE LEARNING SERVICES
2800 Kettering Drive
Waterford, Michigan 48329
Phone: 248.706.4871
Fax: 248.494.9497

Waterford Cyber Academy/Building Seat Time Waiver Online Readiness Assessment

Directions: Please read each question or statement and all of the answer choices. Circle the letter of the answer for each question or statement which you feel best describes you or your situation.

Part One: Technology

1. Do you have internet access at home?
 - A. Yes, we have internet access at home.
 - B. No, but we will have it before I start classes if I'm accepted into the program.
 - C. No, we don't have it and may not be able to get it.

2. Do you have a working computer at home?
 - A. Yes, I have a (check all that apply.)
 - desktop computer
 - laptop computer
 - iPad
 - B. No, but we plan to purchase one before I start classes.
 - C. No.

3. If you have a computer, do you share it?
 - A. No, I am the only person who uses my computer.
 - B. The computer at home is shared, but I can use it any time I need to for school work.
 - C. The computer at home is used by the whole family.

4. Do you have a current email address?
 - A. Yes, I have my own email address and use it all the time.
 - B. Yes, I have an email address, but I seldom use it.
 - C. I use a parent's email address.
 - D. I do not have an email address.

5. How do you manage documents on your computer?
 - A. I save most of my files on a USB drive or the computer in well-organized folders.
 - B. I save everything in one spot on the computer.
 - C. I frequently have a hard time finding things because I can't remember where I saved them.

6. How would you describe your computer/technology skills?
 - A. I'm on the computer all the time and know how to use email, search the internet, download files, create attachments, and use a word processor. I enjoy figuring out how to work with technology and do not get frustrated easily when something doesn't work right.
 - B. I know how to do basic things on the computer. I try to figure out how to do new things on the computer, but sometimes I need help to do it.
 - C. I generally don't use a computer very often. I can get frustrated easily when things do not work the way I think they should.

Part Two: Time Management

7. How much work do you think an online class will be compared to a regular class in a brick and mortar building?
 - A. The SAME amount of work.
 - B. LESS work
 - C. MORE work

8. How much time do you plan to devote to online learning each week?
 - A. At least 5 hours per week per class (30 or more hours total), or whatever it takes to keep my grades up and meet deadlines. School is a priority for me.
 - B. Probably 3 – 4 hours per week per class (18 – 24 hours total). School is important, but I have a lot going on.
 - C. 15 or less hours per week total. I'm have a very busy schedule.

9. If you are working, how many hours a week do you work?
 - A. I don't have a job.
 - B. I have a job and work less than 15 hours a week.
 - C. I have a job and work more than 15 hours a week.

10. How good are you at meeting assignment/project deadlines?
 - A. I generally meet my deadlines for school.
 - B. I meet deadlines most of the time.
 - C. I sometimes have trouble meeting deadlines and try to get extensions.
 - D. I struggle to get work done on time.

11. How do you schedule your time to do school work?
 - A. I try to study every day at the same time and place.
 - B. I don't study every day, but pay attention to due dates.
 - C. I am really busy so I try to fit it in whenever I can.

12. Which statement best describes you?
 - A. I am self-motivated and can work independently to complete work by semester timelines.
 - B. I need weekly/unit deadlines to help me manage my time better and get my work done.
 - C. I procrastinate and am always rushing to get my work turned in.

Part Three: Learning Style

13. What do you do when you need help with an assignment?
 - A. I ask for help when I need it. I will have no problem contacting the teacher for help in understanding the material or assignment.
 - B. I will try to find the answer myself. I might look for help from the family or research things on the internet. If all else fails, I will contact the teacher.
 - C. I do not like to ask questions or ask for help. I'll just do what I can on my own.

14. I am interested in online learning because:
 - A. I need a more flexible school schedule because of my personal situation.
 - B. I find being in a regular classroom situation to be very distracting. I think I will work better taking classes at home.
 - C. I want to graduate and this is my best option for completing my requirements.

15. How would you describe your learning style most of the time?
- A. I think I learn best on my own and can do most of the work without help.
 - B. I think I learn best when I can work at a slower pace, taking time to write notes, read the material several times, etc.
 - C. I think I learn best in class with a combination of lecture, discussions, and reinforcement activities.
16. How do you feel about learning?
- A. I like learning and figuring out new ideas and skills, including technology.
 - B. I like to learn, but I can get nervous if it is too unfamiliar to me, especially with technology.
 - C. I can learn, but I am not one to figure things out on my own, especially with technology.
17. What are your feelings about face-to-face communication for learning?
- A. It is not important to me. I understand that quality interaction occurs without it necessarily being face-to-face.
 - B. I am concerned and I wonder about my ability to learn without seeing the instructor or other students.
 - C. I do not think I can learn without seeing the teacher and students in person.

Part Four: Education Goals

18. What do you plan to do immediately after high school? (Circle all that apply.)
- A. Community College
 - B. Work and Community College
 - C. Four year college or university/live on campus
 - D. Four year college or university/live at home
 - E. Athletics at Division I or II school
 - F. Athletics
 - G. Technical School
 - H. Military
 - I. Other _____

Student Signature _____

Parent Signature _____



Waterford School District Cyber Academy Reference Form



An appointment with your school counselor is recommended before turning in your application

Students being considered for a seat time waiver must have one reference form from a counselor, teacher consultant or administrator of the home school building. A second reference form may be completed by a knowledgeable staff member, social worker, psychologist or community member. Students for consideration should have an aptitude for independent learning as most of the learning will be at home.

School: Durant Kettering Mott Mason Pierce

Name of Student: _____ ID Number: _____ Grade: _____

Does the Student have an IEP? yes no if yes, caseload teacher _____ 504 plan? yes no

Name of Person completing form _____

Position/Affiliation with Student: _____

Phone Number: _____ Email: _____

Please complete this **confidential form** and send it to TOOLS administrator by email attachment or **in a sealed envelope**. Do not leave it blank and do not give this to the applicant to deliver. If accepted, the student will primarily be taking online courses to earn credit. It is important that a good picture of the student is made to determine the likelihood for success based on information we receive from school and home. Along with completing the chart, please give a good overall view of the student's academic status.

	Unknown	Below Average	Average	Above Average	Outstanding
Overall Academic Effort					
Overall Academic Ability					
Attitude Toward Learning					
Reading Skills					
Computer Skills					
Experience With Online Learning (Credit Recovery?)					
Problem Solving Skills					
Communication Skills – Advocates for Self					
Social Skills					
Support from Home					
Self Directed Learner					
Organizational Skills					
Time Management Skills – Work in on Time					
Potential for Success in Seat Time Waiver Program					
Attendance					

Please add any additional information you believe will be helpful below. If you need more room, use the back of this form.

Signature _____

Date _____