



1. VIRTUAL CONSENT AGREEMENT:

Due to changes in the State of Michigan Pupil Accounting laws, the Oxford Virtual Academy must receive consent to offer your student(s) virtual courses. This includes **all** online and community vendor courses that we offer.

Please enter your student(s) name(s) below and provide your signature:

If you have more students to add, please complete an additional form.

Student's Name (First & Last): _____

Student's Name (First & Last): _____

Student's Name (First & Last): _____

I give consent for my student(s) to take online/virtual courses with the Oxford Virtual Academy:

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

2. *MULTI-SCHOOL DISCLOSURE:

If you plan to take courses with any other public/private school, you **must** disclose this to OVA. This includes any other program that collaborates with and receives funding from the State of Michigan through another school. If you are taking classes with another public/private school, you are limited to registering for only **2 classes** with OVA. If you enroll for more than 2 classes with OVA whilst enrolled with another public/private school, **you will be financially responsible.**

Please choose the correct statement below and provide your signature:

- YES**, my student(s) **will be** taking courses with another school:
- Name of School District: _____ No. of Courses _____

**Please note: college/university and homeschool partnership courses do not constitute a second school.*

- NO**, my student(s) **will not be** taking courses with any other school.

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

3. ELECTRONIC SIGNATURE AUTHORIZATION:

Please enter your name below. In doing this, you are entering your legally binding electronic signature.

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