

Student Name: _____ **Date:** _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Gender

M F

Grade Level: 9 10 11 12

Phone: () E-mail Address: _____

Parent/Guardian E-mail Address: _____

Student Signature: _____

Parent/Guardian Signature: _____

Counselor Signature: _____

VHS Course Information

VHS Course : _____ Semester(s) desired: _____

Alternate
VHS
Course:

Reason for registering for a VHS course:

Required Signatures

Guidance Signature: _____

Subject Area Supervisor: _____

VHS Site Coordinator: _____ Date Registered: _____
Comments: _____
Student Login: _____ Password: _____

Administrator Signature: _____ Date: _____

VHS Requirements

1. VHS course cannot substitute a course already offered at Rocky Hill High School.
2. VHS course cannot be used if it is a final credit toward graduation.
3. VHS preference given to junior and senior students.
4. VHS course will count toward GPA, but it will not count toward honor roll.
5. Students taking VHS AP courses are required to take the AP exam (VHS policy states that students are responsible for the cost of the exam).
6. VHS program is considered rigorous. Students must be independent learners and plan on devoting several hours to their VHS course.
7. Students may only enroll in one VHS course per semester.