



Dallas Virtual Academy (DVA): Middle School Registration

2021-2022 School Year

Student Name _____ DOB _____ Grade _____

School Last Attended _____

Parent/Guardian Name #1 _____

_____ Address _____

_____ Email _____

_____ Phone numbers - home/work/cell _____

Parent/Guardian Name #2 _____

_____ Address _____

_____ Email _____

_____ Phone numbers - home/work/cell _____

1 Semester Minimum Commitment Requirement

Reason for requesting DVA:

☐ Looking for a different educational setting

☐ Needing advanced placement classes

☐ Medical reasons

☐ To receive Tutoring

☐ COVID-19 Concerns

• Other _____

Additional information on student:

Has your student:

- | | | |
|--------------------------------------|-----|----|
| • Ever on an IEP? | YES | NO |
| • Ever on a 504 plan? | YES | NO |
| • Ever in TAG? (Talented and Gifted) | YES | NO |
| • Ever in an EL program? | YES | NO |
| • Ever home-schooled before? | YES | NO |
| • Ever been expelled? | YES | NO |
| • Any pending court issues or PO's | YES | NO |
| • Is your child a parent? | YES | NO |

Name of Parent/Guardian completing this registration _____

Signature _____ Date _____

Approved _____

Denied _____

Transcripts Requested Date _____

Records Requested Date _____

DVA Principal Signature: _____ Date: _____