



Out of District Credit Transfer Agreement

Student Name: _____

Thank you for your interest in taking a privately enrolled, parent-paid online course with Spokane Virtual Learning (SVL). Since your student is not enrolled with Spokane Public Schools, we want to ensure that you and your district are aware of and agree to the following information:

- Spokane Virtual Learning is an approved online course provider meeting online learning requirements for Washington State students.
- Spokane Virtual Learning (SVL) is a program of Spokane Public Schools (SPS). However, the SVL program is not a school and therefore does not transcribe credits for students who are not enrolled in SPS schools in our district.
- Each Washington State school district has their own policy regarding students enrollment in online courses and how they will treat privately enrolled, parent-paid online courses. Your district/school should help ensure that the student will take an appropriate course for his/her needs.

I confirm that our district will accept and transcribe the credit from Spokane Virtual Learning's grade report.

School Administrator or Counselor Signature

Date

School District

I understand and agree to the above statements.

Parent Signature

Date

For more information please visit <http://www.k12.wa.us/ALD/>

Distribute Copies as follows: copy to Spokane Virtual Learning, copy to parent/guardian, copy to District of Residence