



# Community E-Learning Pod Policies

We are looking forward to having you join us for Balance 180's Community E-Learning Pod. Please see below for our policies for this program.

---

## Family Information

Parent/Guardian Name: \_\_\_\_\_

Student Name(s): \_\_\_\_\_

### *I have read and agree to comply with the following policies:*

I understand that if my child has a fever or any symptoms of feeling ill, I must notify Balance 180 and my child must stay home until symptom-free for at least 24 hours.

I understand that the Community E-Learning Pod is available on the following days: Monday, Tuesday, Thursday, and Friday. The program does not meet on Wednesdays.

I understand that this program is a nine-week commitment. Therefore, if I wish to withdraw my child from the program at any time I must provide written notice via email to [frontdesk@balance180.org](mailto:frontdesk@balance180.org) as soon as possible so another student can have the opportunity to participate.

I understand that if my child needs to miss a day for whatever reason, I will notify Balance 180 via email at [frontdesk@balance180.org](mailto:frontdesk@balance180.org) so that they can plan accordingly.

I understand that if my child's attendance lapses without notification, my child may lose his or her spot.

I understand that the E-Learning Pod follow the Alachua County Public Schools' calendar and will not meet on school holidays, closures, teacher workdays, etc.

### *I verify that I have read and comply with the Community E-Learning Pod Policies above.*

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## Communication with Student's Teacher

At some point there may be a need for a member of our team to reach out to your child's teacher(s) to ask for clarification on an assignment, help finding an assignment, etc. via the online chat/messaging feature the teacher has set up. Please indicate below if you authorize Balance 180 to contact the teacher(s) or if you would prefer to do so.

I authorize Balance 180 to message my child's teacher(s) as needed for appropriate online school-related questions that keep my child on track with their online schooling. **Parent/Guardian Signature:** \_\_\_\_\_

I do not authorize Balance 180 to message my child's teacher(s), and would like any online school-related questions to be relayed to me directly for me to follow up with the teacher accordingly. My preferred means of contact is as follows (Please complete all that apply):

Phone # 1: \_\_\_\_\_ Phone #2: \_\_\_\_\_ Email: \_\_\_\_\_