

EDUCATION, ANYTIME, ANYWHERE



EDUCATION, LEAVING NO STUDENT BEHIND

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COMMITMENT TO EDUCATIONAL EXCELLENCE

ED Anywhere is committed to assisting you in reaching your educational goals. ED Anywhere provides you with daily, 24 hour access to appropriate programs and scholastic courses, a self-paced and flexible schedule, low tuition rates, easy ways to communicate with staff, career/vocational planning, and professional guidance for your current and future academic needs.

In order to receive the most positive and useful benefits from the ED Anywhere program, you must be willing to dedicate quality time to our curriculum and make learning a top priority. ED Anywhere has identified several ways you can actively contribute to your own success. Please read the student expectations below and sign your name where indicated. Your signature represents your agreement to abide by ED Anywhere student expectations.

1. I will contact ED Anywhere by telephone, email or fax if I have any questions or concerns about my courses, programs, or diploma status.
2. I will commit to completing at least 10 submissions per week. I understand that I must pay tuition on a monthly basis until I successfully complete my class. My commitment to completing classes quickly will save me even more money.
3. I will contact ED Anywhere for academic help when I need it, rather than ignoring the class if it gets too difficult. Ignoring the problem will hinder my academic progress.

Student Signature _____ Date _____

As the parent/guardian, who provides financial assistance for the student to participate in the ED Anywhere program, I agree to take an active role in monitoring my child's academic progress. My signature represents my agreement to abide by ED Anywhere parent/guardian expectations.

1. I will access my child's ED Anywhere account once a week to ensure they are actively working on their class submissions and preparing for their Midterm and Final exams. If my child has changed their password preventing me from accessing their account, I will contact ED Anywhere to request my child's password be changed back to the one we were assigned at enrollment.
2. I will advocate for my child when they are experiencing academic or personal difficulty by contacting the ED Anywhere staff to make them aware of the situation.
3. I will contact ED Anywhere if I have any questions or concerns about my child's courses, programs, or diploma status.
4. I will complete the ADD/DROP, Exam Proctoring, Official Transcript Requests and Withdrawal forms as necessary during my child's participation with ED Anywhere. I understand these forms are available to me at www.edanywhere.com.
5. I will pay the monthly tuition and fees on time to avoid any negative interruption of my child's educational endeavors.

Parent/Guardian Signature: _____ Date _____