

New Student Sign Up

* First Name

Middle Name

Last Name

* Email

* Confirm Email

* Date of Birth

Month Day Year

* User Name

A-Z, a-z, 0-9 allowed, no spaces or other characters

* Password

* Confirm Password

* Security Question 1

Please Choose

* Security Answer 1

* Security Question 2

Please Choose

* Security Answer 2

Address

☒ Primary

Home

1234 You Dont Know Drive
St. Augustine Florida St.
Johns 32084
United States

Add Another Address

Telephone

☒ Primary

Work

904-547-8088

Add Another Telephone

Next

Guardian information:

Parent / Guardian Information

Personal Information

Go Back Next

*Parent/Guardian Type: Legal Guardian *First Name: Mom Middle Name: *Last Name: Student

*Email Address: Ryan.Erskine@stjohns.k12.fl.us

Address

Primary Home 1234 You Dont Know Drive St. Augustine Florida St. Johns 32084 United States Add Another Address

Telephone

Primary Home 904-547-8088 Add Another Telephone

Add Another Parent/Guardian

Student Race / Ethnicity*

Race

Go Back Next

*What is your race? (Mark all that apply - at least one is required)

☐ American Indian or Alaska Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander
☒ White

Ethnicity

*Are you a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

☒ No ☐ Yes

*Required by Florida Department of Education

Go Back Next

Course	Credits	Segment/ Semesters	Earliest Preferred Start Date	Virtual School	Survey
English 1 Code: 1001310 Official Name: English I	0.5	Segment 1	02-14-2017	St. Johns Virtual School	View

Edit Backpack

Student Information

Legal Name: Test Student
Grade: 10
Date of Birth: Apr 01, 2009
Email Address: Ryan.Erskine@stjohns.k12.fl.us
Phone: 904.547.8088
Residential County: St. Johns
Physical School Name: St. Johns Virtual Franchise

Parent/Guardian Information

Type: Legal Guardian
Name: Mom Student
Email Address: Ryan.Erskine@stjohns.k12.fl.us
Phone: 904.547.8088

This is a preview of your course request and account information. If you need to make changes, you can do that by selecting 'Edit' on this page.

If you are okay with your information on this page, select 'Continue'.

Continue

Commitments

1 Student Commitment

By clicking the "I Agree" button at the bottom of this page, I agree to submit 100% of my own work, and I commit to Academic Integrity by registering as a student at Florida Virtual School (FLVS). By clicking the "I Agree" button, I also agree to take a proctored exam at any time if requested. I understand that I may be required to have a web camera in order to complete this process. In addition, I agree that for any form of proctoring, I will need a picture ID. I also understand that should I finish the segment in an extremely accelerated pace, I may be subject to additional accountability measures. Failure to comply with the Academic Integrity commitment or refusing to take a proctored exam will be grounds for removal from the FLVS program. Further, I agree to comply with all of the policies and procedures listed in the FLVS district Student Progression Plan and FLVS Code of Conduct/Student Handbook, which is posted on my VSA Student dashboard and at www.flvs.net.

☒ I agree (Student Only)

2 Parent/Guardian Commitment

Parent/Guardian is allowed to agree to FLVS on behalf of their student

As a parent/guardian of the above named student, I authorize the enrollment of the student into the Florida Virtual School (FLVS) program according to the policies and procedures of the Florida Virtual School listed in the FLVS district Student Progression Plan, published at www.flvs.net, and the FLVS Student/Parent Handbook, published to my student's VSA dashboard and at www.flvs.net.

☒ I agree (Parent/Guardian Only)

Submit

Go Back

flvs

Finish your sign-up

- ✓ Customize your results
- ✓ Browse your Course Catalog
- ✓ Create your account

4 Finish your sign-up

Great job so far! You are almost done signing up for your FLVS course(s). Check your email for our registration checklist to ensure your enrollment goes smoothly.



View Course Request Summary

Toll Free: 1.800.374.1430 or Contact Us

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FAQs

Stay Connected



flvs

Browse Catalog Create account & sign-up Finish sign-up

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2

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Course Request Summary

Course	Credits	Segment/ Semesters	Earliest Preferred Start Date	Virtual School	Survey	Share your course with others!!
English 1 Code:1001310 Official Name: English I	0.5	Segment 1	02-14-2017	St. Johns Virtual School	View	Share Tweet

Student Information

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Phone: 904.547.8088
Residential County: St. Johns
Physical School Name: St. Johns Virtual Franchise



Sign out

Great news! We are processing your information and creating your FLVS account right now. You did a great job so far, but please give us 60-90 minutes to finish that process before attempting to log in for the first time!