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3050 E. Flamingo Rd.  
702-855-8435

### Out-of-District (Non-CCSD) Student Summer Course Request

**STUDENT INFORMATION:**

Last Name \_\_\_\_\_ First Name: \_\_\_\_\_  
Current Grade Level: \_\_\_\_\_ CCSD Student # (if known): \_\_\_\_\_  
Student Email (required): \_\_\_\_\_ Parent Email (required): \_\_\_\_\_  
  
Course #1: \_\_\_\_\_ Semester: \_\_\_\_\_  
Course #2: \_\_\_\_\_ Semester: \_\_\_\_\_

Current Full-Time School: \_\_\_\_\_ Phone #: \_\_\_\_\_

**COUNSELOR:**

I have reviewed the student's transcript and confirm that the courses listed above are correct and appropriate:

*This section is recommended but  
not required for registration  
during summer term.*

\_\_\_\_\_  
Counselor name (print)  
  
\_\_\_\_\_  
Counselor Signature  
Date: \_\_\_\_\_

**PARENT/GUARDIAN:**

I understand that as an out-of-district CCSD enrollment, Nevada Learning Academy is unable to guarantee that the above requested course(s) are correct and appropriate for my child. NVLA requests input from the home school counselor when identifying the courses needed.

\_\_\_\_\_  
Please print name  
  
\_\_\_\_\_  
Parent Signature  
Date: \_\_\_\_\_

This form and the following documents must be brought to NVLA to register.

- Proof of Address: Copy of one (gas bill, water bill, power bill, lease)
- Copy of Shot Record & Birth Certificate
- ID

Out-of-District Course Fee  
\$175