

**Georgia Department of Education  
FLP Enrollment Parent Response Template**

**ENROLLMENT IN FLEXIBLE LEARNING PROGRAM (FLP)**

**School Year: 2016-2017**

**PEYTON FOREST ELEMENTARY/ATLANTA PUBLIC SCHOOLS**

☐ Yes, I would like for my child to participate in the Flexible Learning Program.

☐ No, I do not wish for my child to participate in the Flexible Learning Program.

**Please Print**

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: **Daytime** (\_\_\_\_) \_\_\_\_\_ **Evening** (\_\_\_\_) \_\_\_\_\_

Student's School: \_\_\_\_\_

Student's Grade: \_\_\_\_\_ Gender: Male ☐ Female ☐

Parent/Guardian's Name \_\_\_\_\_  
(Please Print)

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_