



**MYRON L. POWELL ELEMENTARY SCHOOL**  
225 Main Street Cedarville, NJ 08311 Phone (856) 447-4237 Fax (856) 447-3446

## **Request for In-Person 50/50 Learning Program**

**Use this form to request transitioning FROM Full-Time Remote Learning  
TO the In-Person 50/50 Learning Program**

To be eligible to change learning models, the child must be in his/her current learning model for a minimum of one Marking Period (approximately 2 months).

**I request to move my child to the In-Person 50/50 Learning Program for the Marking Period checked below:**

\_\_\_\_\_ - To begin the 3<sup>rd</sup> Marking Period on February 1<sup>st</sup> (Form due on January 15, 2021)

\_\_\_\_\_ - To begin the 4<sup>th</sup> Marking Period on April 14<sup>th</sup> (Form due on March 29, 2021)

**Name of Student:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Grade:** \_\_\_\_\_

**Name of Guardian Completing the Form:** \_\_\_\_\_

Placement back into school will be based on availability in classes due to social distancing mandates. Requests will be considered however classroom space requirements will be the determining factor.

**I request my child to attend school:**

\_\_\_\_\_ - In-Person Monday & Tuesday, and Virtual Learning on Wednesday, Thursday & Friday.

\_\_\_\_\_ - In-Person Thursday & Friday, and Virtual Learning on Monday, Tuesday & Wednesday.

**All questions regarding this request or the outcome should be directed to Dr. Magan at [smagan@myronlpowell.org](mailto:smagan@myronlpowell.org).**

**You will receive a response to your request within 5 school days from the date of receipt.**