

WDE VIRTUAL 307

Virtual Education Program Statement of Assurance

The undersigned school district personnel agree and verify for the 2025-26 proposed virtual education program the school district:

1. Possesses the necessary financial, personnel, and technical infrastructure capacity to effectively administer a virtual education program.
2. Will ensure each virtual education teacher meets Wyoming certification and annual professional development requirements regardless of whether the instructor is employed by the school district.
3. Will comply with all virtual education program statutes, rules and regulation, and policy requirements including tracking student participation, recording attendance, providing accurate WDE data collection reporting, and obtaining approval for reporting systems used in lieu of the district's permanent student information system.
4. Will ensure any virtual education courses or program elements purchased from a vendor comply with all virtual education program statutes, rules and regulation, and policy requirements including alignment with current state content and performance standards.
5. Will ensure virtual education students meet Wyoming residency requirements, have reliable internet access, and have a family-designated learning coach.
6. Will provide all students in grade 8 with the opportunity to complete the Hathaway Scholarship Eighth Grade Unit of Study per W.S. 21-16-1308(b)(i)(C) and all students in grades 8-12 with the opportunity to receive Hathaway Scholarship Program counseling per W.S. 21-16-1308(b)(i)(D).
7. Will ensure students with disabilities have equal access to the program, are provided with student IEP services, are provided with accommodations as required by section 504 of the Rehabilitation Act, and will ensure the district maintains Child Find responsibilities under IDEA.

School District: _____

Superintendent Signature: _____ Date: _____

Virtual Education Coordinator Signature: _____ Date: _____

Business Manager Signature: _____ Date: _____

Special Education Director Signature: _____ Date: _____

School Board Member Signature: _____ Date: _____