

Name: _____

Is there a school, organization or individuals to support your proposed credit flexibility plan? If yes, please provide the contact information.

How will you demonstrate mastery? Please be specific.

I will or may be involved in Athletics.

I respectfully submit this application: _____
Signature of Student

I support this application: _____
Signature of Parent

Distribution
_____ Student/Parent
_____ Counselor
_____ Teacher of Record
_____ Credit Flex Team

Name: _____

STUDENT CONTRACT

The student and parent must initial each item below as indication of having read and accepted the following:

Student Parent

- _____ _____ The student will hold primary responsibility for the overall success or failure of the course.
- _____ _____ If the student’s Credit Flexibility Plan is accepted, he/she will earn a letter grade for the course.
- _____ _____ There are NO weighted grades for credits earned through Credit Flexibility Option.
- _____ _____ The grade and credit earned will appear on his/her transcript.
- _____ _____ The student can withdraw from the Credit Flexibility Option according to the drop/add guidelines without penalty.
- _____ _____ Academic honesty rules apply just as they do in a traditional class setting.
- _____ _____ The student has discussed with his/her counselor how the outcome of the Credit Flexibility Option will impact any traditional classes he/she subsequently takes and/or his/her ability to schedule other courses.
- _____ _____ The student must meet attendance requirements set forth by his/her plan.
- _____ _____ The student will be expected to allocate an average of one hour of every school day to work toward the completion of this course.
- _____ _____ The student is not permitted to be in the building during times that he/she is not scheduled for a traditional class unless he/she has a scheduled appointment with teachers, counselors, or administrators.
- _____ _____ The student’s teacher and/or other school authorities have the right to cancel this course/credit option if:
(1) the student violates any rule/policy stated in the KHS student handbook; (2) the student does not meet regularly and actively engage with the teacher and course material according to the KHS drop/add policy; (3) the student does not make steady progress toward the completion of the course.
- _____ _____ The student has discussed athletic eligibility requirements with the school counselor prior to the development of his/her Credit Flexibility Plan to ensure compliance with KHS, OHSAA and NCAA rules.
- _____ _____ The student is responsible for meeting district and state graduation requirements.
- _____ _____ The student is responsible for ensuring that he/she has met district and state graduation requirements by established deadlines to participate in senior commencement.

Your signature indicates that you have discussed the above statements with your parents, understand the commitment you are endeavoring to make, and agree to the policies set forth by Kirtland Local Schools.

Signature of Student _____ Date _____

To the PARENT/GUARDIAN of the student submitting a flexible credit proposal:
Please read and discuss the above policies with your student. Your signature indicates that you have read the above statements and agree to the policies set forth by Kirtland Local Schools. Your signature also relieves the school of any liability for your son/daughter during times in which student is not required to be at school during this Credit Flexibility Plan, should it be accepted.

Signature of Parent/Guardian _____ Date _____