Bay City Public Schools

Student Application for Individual Assessment in Lieu of Course-March Cycle

Student Name:_____ Date of Request:_____

Address:_____ City/State/Zip:_____

I am requesting to demonstrate mastery of the content of a course being offered at Bay City Public Schools.

- I understand that this assessment may include not only an examination, but also written reports, research papers, a portfolio of other assessment required within the course. I can use these earned credits towards graduation. However, I can only earn a "pass" notation and that my score will not be used towards computing my grade point average. I am also aware that if I earn a "pass" notation in this course or courses, I cannot subsequently request individual assessment for a prior course in the sequence, or enroll in a lower course sequence in the same subject.
- I understand that I cannot "opt out" of Government.
- I understand that testing out of any subject may affect my MEAP High School Test scores as a result of not participating in classroom instruction, course work and discussion.
- I understand that I am responsible for contacting my counselor to review NCAA policies concerning course grades with a "CR" notation.
- **I understand that in order to pass an exam, I must receive a grade of C+ or higher.** For district opt-out exams, 78% will be considered a C+. I also understand that in the spirit of the law, I cannot attempt to test out of a course I have previously failed.

Course for which I am requesting individual assessment:

_____ Semester One_____ Semester Two_____

(A separate application must be completed for each individual assessment in lieu of course request.)

List the courses you have already passed in the curriculum area in which you are attempting to "opt out":

_____ _____ _____

Student Signature Parent Signature Counselor Signature

*__**Request forms will not be accepted after the posted due date.**__

OFFICE USE ONLY

This request is rejected due to the following:

_____ Student has previously tested out of a higher course in this sequence.

_____ Student has previously failed Opt-Out.

_____ Other (specific) _____

INSTUCTOR USE ONLY

Results of individual assessment: _____ Date: _____

I hereby affirm that: _____ has __ has not __ demonstrated mastery of the content for the course.

_____ _____

Instructor's Signature Date