ES/MS APPLICATION FOR CREDIT BY EXAM

(Parent signature below serves as written approval for accelerating the student if he/she meets the score requirements)

NOTE: Online testing is not available for K-2; these exams must be administered at a KISD facility.

To Be Completed by Campus Counselor or Administrator Only

Student Last Name: _____ First Name: _____ Student ID: _____ DOB: _____

Student Mailing Address (include Apt # & ZIP Code): _____

Campus: _____ Campus POC: _____ Campus Phone: _____

Current Enrolled Grade: _____

K-2 = In Person

Test 1:

CBE or EFA   3-8 = Online at Home

Subject/Test: _____ Grade: _____ Test Type: _____ Test Location: _____

Test 2:

Subject/Test: _____ Grade: _____ Test Type: _____ Test Location: _____

Test 3:

Subject/Test: _____ Grade: _____ Test Type: _____ Test Location: _____

Test 4:

Subject/Test: _____ Grade: _____ Test Type: _____ Test Location: _____

1. Is student receiving services under special special education or Section 504? ☐ Yes ☐ No

    If YES, has the IEP/IAP testing page been attached? (*Required*) ☐ Yes ☐ No

2. For **CBE** only: Is prior FINAL grade lower than 60? If YES, student cannot take CBE. ☐ Yes ☐ No

3. Is a copy of student's transcript or report card attached? (*Required*) ☐ Yes ☐ No

4. Has a copy of the brochure and applicable Study Guide been provided to student? ☐ Yes ☐ No

5. Have instructions for accessing the online testing platform been provided to student? ☐ Yes ☐ No

Counselor or Administrator must sign & date here: _____ Date: _____

To Be Completed by PARENT/GUARDIAN Only

My initials in the box on the right indicate I am aware that my child will take his/her exam(s) online and will be recorded (video and audio via computer webcam and microphone) while taking his/her exam(s). The recordings, in addition to other data, will be sent to the University of Texas and/or Texas Tech University for review after my child has submitted his/her exam(s).

Signature: _____ Date: _____

Phone Numbers (include work & cell): _____

E-mail Address: _____