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**Credit Recovery Plan** *CPSHS Counseling Dept., 2019*

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| **Course** | **# Credits Needed** | **WHEN?**  *Q1, Q2, Q3, Q4, Summer* | **HOW?**  *APEX Online, Evening HS, Summer School* | **Registration Date** |
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**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Expected Graduation Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_

**I understand that if I do not follow the plan outlined above, I am at-risk of not graduating by the expected graduation date.**

**Student Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_