

Brownsville Independent School District Enrollment Form
Credit By Exam

Notice : A \$25.00 non-refundable fee must be paid by the student when registering for each Credit By Exam.

STUDENT INFORMATION

Last Name	First Name	Student ID	Daytime Phone	Grade
Mailing Address		City	State	Zip Code
Birthdate	Sex	Counselor Name		
	Male Female			

We, the parent and student understand that if I, the student, do not report on the day of testing, the twenty-five dollar (\$25.00) fee will not be refunded.

Parent Signature	Date	Student Signature

SCHOOL INFORMATION (must be completed by school official). ALL public school students must have signature of school official.)	High School SAT Code	Date
	440921	

School Name : Lopez Early College High School

School Official's Signature	PRINT School Official's Name	Title
		COUNSELOR

School Bookkeeper's Signature	Amount	Receipt Number

Select Course(s): Maximum two (2) courses

English/ Language Arts

- _____ English IA
- _____ English IB
- _____ English 2A
- _____ English 2B
- _____ English 3A
- _____ English 3B
- _____ English 4A
- _____ English 4B
- _____ Communication Applications

Mathematics

- _____ Algebra 1A
- _____ Algebra 1B
- _____ Algebra 2A
- _____ Algebra 2B
- _____ Geometry A
- _____ Geometry B
- _____ Math Models/Appl. A
- _____ Math Models/Appl. B

Social Studies

- _____ Psychology
- _____ Sociology
- _____ US Government
- _____ US History A
- _____ US History B
- _____ World Geography A
- _____ World Geography B
- _____ World History A
- _____ World History B

Science

- _____ Biology A
- _____ Biology B
- _____ Chemistry A
- _____ Chemistry B
- _____ Physics A
- _____ Physics B
- _____ IPC A
- _____ IPC B

Other Languages

- _____ Spanish 1A
- _____ Spanish 1B
- _____ Spanish 2A
- _____ Spanish 2B
- _____ Spanish 3A
- _____ Spanish 3B

***Other:** _____

*** Must receive prior approval from _____ & I Dept.**

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