

## **Olentangy Local School District Credit Flexibility Information and Guidelines**

### **What is Credit Flex?**

Credit flexibility applies to any alternative coursework, assessment and or performance. If a student is using Credit Flexibility to receive equivalent graduation credit, they must apply for and receive approval from the school district in advance. Approved credit awarded through this policy will be posted on the student's transcript and count toward a student's grade point average (GPA), class rank and graduation credit. The school district will include details of the Credit Flexibility policy and program on the district website and in the Student Handbook at middle and high school levels.

What are the two Credit Flexibility Options?

Option A: Credit by Subject Area Competency through Assessment

- Testing out and earning credit for a high school course through the successful completion of an assessment

Option B: Credit by Educational Option

- Earning credit through the creation of and competition of a student-designed project/proposal

### **Considerations:**

- Academic content areas taught at Olentangy are aligned to the district and state curriculum and support student performance on the Ohio Graduation Test. Credit Flexibility proposals for courses offered at Olentangy Local Schools should support these same provisions.
- Students may use Credit Flexibility to propose a course not offered by Olentangy Local Schools. However, the student must include a rigorous academic content as part of their Student Action Plan/Contract to be considered for this option.
- Some courses may require performance components in addition to the assessment in order to earn the credit.
- Credit Flexibility may impact a student's athletic eligibility just as any course taken under the traditional model.
- Currently NCAA does not accept courses taken as a Credit Flexibility option.

### **Application:**

- Any student may apply for credit to be awarded through Credit Flexibility by submitting the Application for Credit Flexibility Form. All required information must be provided. The student may be required to provide supporting documentation as determined by the Principal or designee.
- All student applications for Credit Flexibility are due in the building principal's office by May 15th of the prior school year. Second semester requests are due by December 1st.
- Any requests outside this timeline will be at the discretion of the building principal or may follow the appeal process.

**Review of Application:**

- The principal or designee will review the application and notify the student regarding approval status.
- Upon approval of a completed application, the student may then proceed with the learning activity and credit will be awarded when all requirements are completed and evaluated.

**Awarding Credit:**

A student will be eligible to receive credit upon satisfactory completion of the coursework outlined in the approved proposal. The following standards and guidelines apply to awarding credit:

- There is no limit to the total number of credits that may be awarded.
- Credit from other districts and educational providers, including online providers may be accepted.
- The Principal or designee may award credit for preapproved assessments, performances or work products that demonstrate mastery of content of any course in the Olentangy Local School District Course Book. Elective credit not offered at Olentangy Local School District may also be earned in this manner as preapproved.
- If a student transfers to Olentangy Local School District and the student has not completed the course requirements to receive credit as approved by the previous district, the principal or designee may consider this as an ongoing Credit Flexibility Plan. This plan may require adjustments to meet Olentangy credit requirements.
- Should an Olentangy student transfer to another school district, upon request of the student or parent, the district will forward a copy of the approved application to the new district for their consideration. Acceptance of this plan is at the new district's discretion.
- Out of state transfer credits are contingent upon the receiving districts procedures.
- Olentangy Local Schools will accept all credit for completed Credit Flexibility courses.
- Pass/Fail is not a grading option. Only letter grades will be awarded.
- A student can only attempt to test out of each course one time.
- To earn Advanced Placement credit via credit flexibility, a student must sit for the corresponding AP test. If a student earns a 3 or higher the transcript will show an A for the course. If that score is not achieved, no credit will be awarded and no grade will appear on the transcript.
- Credit flexibility is permitted for all students in 7th-12th grade.
- Students in grades 7 and 8 may replace a required curriculum class or a high school level course if they progressed through their grade-level curriculum.

Student Name \_\_\_\_\_ Course \_\_\_\_\_

**Application for Credit Flexibility**

*This application must originate in Guidance with a counselor/student conference.*

**STUDENT INFORMATION**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_ Student ID \_\_\_\_\_

Student Phone Number \_\_\_\_\_ Student Email \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Parent/Guardian Phone \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

Answer the following questions by indicating “yes” or “no” regarding your Credit Flexibility request.

	YES	NO
Please indicate if you are on an IEP, 504 or Intervention Plan.		
Please indicate if you receive English Second Language services.		
Will this decision affect your athletic eligibility?		
Will this decision affect your grade placement or graduation?		

**COURSE INFORMATION**

Course Title \_\_\_\_\_ Credit(s) \_\_\_\_\_ Academic Year \_\_\_\_\_

Course Type (check one)

**Options A**

- Credit by Subject Area Competency through Assessment (Test Out)

**Complete Action Plan/Contract for Option A and submit to the school office**

**Option B**

- Credit by Educational Option

**Complete Action Plan/Contract for Option B and submit to the school office**

I have reviewed Credit Flexibility options with my counselor and understand creating a plan is my responsibility.

I understand that any grade earned as part of the Credit Flexibility option will be treated as a permanent grade on my transcript. The assessment may only be taken one time. If a student wishes to replace the grade on the assessment, they must participate in the full-length course in a classroom.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Guidance Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Name \_\_\_\_\_ Course \_\_\_\_\_

**Option A: STUDENT ACTION PLAN/CONTRACT**

**1. Select what the student will do to earn this credit. Check One (1):**

- Test-Out (85% Mastery required or meet all elements of a proficiency rubric)

**2. List the name of the staff member who will score the assessment**

Name \_\_\_\_\_ Position \_\_\_\_\_

**3. STUDENT CONTRACT**

The student and parent have read and initialed each item below as an indication of acceptance:

Student	Parent	
		The student will hold primary responsibility for the overall success of the course.
		The student will be expected to allocate and manage their time in working toward course completion.
		The student will be expected to independently complete the work required to complete the course.
		The student will be expected to update parents regarding their progress.
		The student must complete all work by the due dates agreed upon in this contract
		The student may appeal Credit Flexibility course approval decisions to the Department of Curriculum and Instruction prior to the start of the semester. The appeal must include a letter outlining the reason for the review as well as a copy of the original application and must be received within 10 days following the denial notification.

**4. Course Completion Timeline (select one):**

Date of Assessment \_\_\_\_\_

**I understand the Credit Flexibility Option is an intensive process designed to allow me to work at my own pace to complete this course and believe the student can successfully complete the plan as presented.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

<p><b>TEACHER REVIEW of CREDIT FLEXIBILITY REQUEST</b></p> <p>Comments:</p>  <p>Teacher Signature: _____ Date _____</p>
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**ADMINISTRATIVE REVIEW of CREDIT FLEXIBILITY REQUEST**

- APPROVED
- NOT APPROVED

Comments:

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Name \_\_\_\_\_ Course \_\_\_\_\_

**Option B: STUDENT ACTION PLAN/CONTRACT**

1. Select what the student will do to earn this credit. Check One (1):

- District Pre-approved Credit Flexibility Course
- Coursework (may include reading or writing assignments, projects, assessments or other activities)
- Online learning (include syllabus from online provider)
- Field experience, Internship, Mentorship or Other (if you check this, describe in detail on a separate sheet)

2. List the name and contact information of organization and/or individual supporting your proposed credit activity.

Name \_\_\_\_\_ Organization \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**3. STUDENT CONTRACT**

**The student and parent have read and initialed each item below as an indication of acceptance:**

Student	Parent	
		The student will hold primary responsibility for the overall success of the course.
		The student will be expected to allocate and manage their time in working toward course completion.
		The student will be expected to independently complete the work required to complete the course.
		The student will be expected to update parents regarding their progress.
		The student must complete all work by the due dates agreed upon in this Contract
		The student may appeal Credit Flexibility course approval decisions to the Department of Curriculum and Instruction prior to the start of the semester. The appeal must include a letter outlining the reason for the review as well as a copy of the original application and must be received within 10 days following the denial notification.

4. **Course Completion Timeline (select one):**

- Academic Year
- Semester 1 only
- Semester 2 only
- Other \_\_\_\_\_

Beginning Date \_\_\_\_\_

Check-In Date \_\_\_\_\_ (determined by teacher)

Completion Date \_\_\_\_\_

Student Name \_\_\_\_\_ Course \_\_\_\_\_

**5. Learning Goals**

Answer the question: What will I learn?

(Learning goals should completely identify the learning that will take place and should be tied to Olentangy Curriculum Maps as appropriate. Record on separate sheet and attach to this form.)

**6. Action Plan**

Answer the question: How will I learn this curriculum?

(Identify activities and action to accomplish the learning goals. Record on separate sheet and attach to this form.)

**7. Assessment**

Answer the question: How will I show I have learned this curriculum?

(Identify the projects, presentations, written assignments, tests and or other assessments to show what has been learned. Record on separate sheet and attach to this form as the cover sheet.)

**8. Timelines**

All requirements and timelines must be defined in the plan by the student.

I understand the Credit Flexibility Option is an intensive process designed to allow me to work at my own pace to complete this course and believe the student can successfully complete the plan as presented.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**TEACHER REVIEW of CREDIT FLEXIBILITY REQUEST**

Comments:

Teacher Signature: \_\_\_\_\_ Date \_\_\_\_\_

**ADMINISTRATIVE REVIEW of CREDIT FLEXIBILITY REQUEST**

- APPROVED
- NOT APPROVED

Comments:

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_