



# Credit by Exam

For Acceleration

## Registration Form (Grades 9 – 12)

Select a session below and return the completed form to your child's campus by the registration due date listed for the testing session. **Late registration will not be accepted.**

<u>Test Session Date</u>	<u>Deadline for Registration</u>
<input type="checkbox"/> Session 1: <b>October 10, 2022 (Monday)</b>	<b>September 16, 2022 at 3:00 p.m.</b>
<input type="checkbox"/> Session 2: <b>February 20, 2023 (Monday)</b>	<b>January 20, 2023 at 3:00 p.m.</b>
<input type="checkbox"/> Session 3: <b>June 7 – 8, 2023 (Wednesday – Thursday)</b>	<b>May 5, 2023 at 3:00 p.m.</b>
<input type="checkbox"/> Session 4: <b>August 2, 2023 (Wednesday)</b>	<b>June 8, 2023 at 3:00 p.m.</b>

### Student Information

All information is required. If any information is left blank, no tests will be ordered.

Student Name: \_\_\_\_\_  
Last Name First Name M.I. Current Grade

Date of Birth: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Apartment #: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

### Current Campus:

Middle School – North  Middle School – South  High School

### SUBJECT/SEMESTER

<input type="checkbox"/> English III:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> IPC:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B
<input type="checkbox"/> English IV:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> Chemistry:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B
<input type="checkbox"/> Languages Other Than English: _____	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> Physics:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B
<input type="checkbox"/> Geometry:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> World Geography:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B
<input type="checkbox"/> Math Models:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> World History:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B
<input type="checkbox"/> Algebra II:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> U. S. Government	(1 semester course)	
<input type="checkbox"/> Pre-Calculus:	<input type="checkbox"/> Semester A	<input type="checkbox"/> Semester B	<input type="checkbox"/> Economics	(1 semester course)	

### By signing this form, I attest that I have read and understand the Credit by Exam web page on the Barbers Hill ISD website and I am aware of the exam time limits, the 80% passing score requirement, that the test is administered on specific dates, times, and locations, which may not be at my child's home campus, that I will provide transportation to and from the test site, that I must supervise my child between daily testing sessions, that my child has had no prior instruction in the course(s) for which I selected above, and that I approve my child's acceleration if the required score(s) is/are achieved.

I understand that I will be refunded my deposit after my child completes all exams for which he/she is registered.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Date

**Office Use Only:**  
*Completed Registration Form and Required Deposit Received by:*

\_\_\_\_\_  
Campus Counselor

\_\_\_\_\_  
Date

Student is recommended for acceleration.