

**SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT
CREDIT BY EXAMINATION APPLICATION FORM - GRADES 6-12**

Credit by Examination WITHOUT PRIOR INSTRUCTION

PLEASE PRINT

Campus Principal _____ Campus _____

Name _____ Last _____ First _____ Age _____ Grade _____

School ID # _____ SS# _____ Birthdate _____

Physical Address _____ City/State/Zip _____

Mailing Address _____ City/State/Zip _____

Telephone(s): Home () _____ Work () _____

STUDENTS CAN ONLY TEST FOR A GRADE/COURSE IN WHICH THEY HAVE NOT HAD PRIOR INSTRUCTION

(I understand that my child must meet the requirements of 19 TAC Chapter 74.24 to be accelerated. I also understand that I will be informed of all test results and that, for the purpose of test security, I may not review the tests.)

Junior High & Secondary (6-12)

_____ Grade 6 English/Language Arts 6A & 6B, Mathematics 6A & 6B
Social Studies 6A & 6B, Science 6A & 6B

_____ Grade 7 English/Language Arts 7A & 7B, Reading 7A & 7B
Mathematics 7A & 7B, Texas History/Geography 7A & 7B
Science 7A & 7B

_____ Grade 8 English/Language Arts 8A & 8B, Mathematics 8A & 8B
Science 8A & 8B

Grades 9-12: List the course titles that are requested for credit by examination for acceleration:

_____ (9) grade/course title _____ (11) grade/course title _____

_____ (10) grade/course title _____ (12) grade/course title _____

Yes, I grant permission for accelerated testing through the Curriculum & Instruction Department.
This form **must be signed**. A letter will be sent indicating the test date(s); if you do not receive it, it is your responsibility to call and inquire as to the date.

_____ Parent/Guardian Signature _____ Date

Registration Deadline:	Test Date:
_____ August 5, 2023	_____ September 22, 2023
_____ August 26, 2023	_____ October 7, 2023
_____ January 27, 2024	_____ March 2, 2024
_____ April 28, 2024	_____ June 4-6, 2024

FOR SCHOOL USE ONLY

_____ I certify that the student has not been enrolled, previously or currently, for formal instruction in the course/grade level.

_____ Counselor Signature _____ Date

_____ I concur with the recommendation for the student to earn credit by examination for the subject/grade specified.

_____ Campus Principal Signature _____ Date