



130 King of Prussia Rd.  
Radnor, PA 19087  
610-293-0855  
www.rtsd.org/radnorhs

# Radnor High School

*Invest in Excellence*

## 2024 Radnor High School Application for Science Acceleration

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Current Grade: \_\_\_\_\_ Current School Year: \_\_\_\_\_

Current Science Course and Level: \_\_\_\_\_

Requested Approved Summer Course: \_\_\_\_\_  
*(Please review the list on the School Counseling website.)*

Location: \_\_\_\_\_

Date(s) of Course: \_\_\_\_\_

I understand that I am required to complete the above summer course. I also understand that I am responsible for scheduling a time on Monday, August 26<sup>th</sup> – Wednesday, August 28<sup>th</sup> to complete the equivalent Radnor course final through the RHS School Counseling Department by calling 610-293-0855 x3529. I understand that I need to take the final in the level (Honors or Advanced) of the course in which I wish to accelerate. **I understand that I must score an 80% or higher on the exam to continue in that level of course. If I score a 79% - 60% I will be placed in the lower academic level. If I achieve a 59% or lower, RHS Administration and Science Department Chair will recommend I repeat the course during the next school year, no acceleration will be granted without an override form being completed, and no credit will be awarded toward graduation.**

I understand that the course will be counted toward my science graduation requirements, but that the summer course will not be recorded on the RHS transcript, and the grade will not be counted into my GPA. The grade documentation from the summer school will be attached to my final transcript for documentation for colleges.

*Parents and students need to be aware summer courses are designed to move faster and do not always cover all the material or chapters that would be covered during a full year course. Therefore, some independent work during the year or meeting with the student's teacher on a regular basis may be needed to achieve the expected level of success.*

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

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

**This form must be submitted to your School Counselor no later than Friday, June 7<sup>th</sup>, 2024.**

The mission of the Radnor Township School District is to inspire in all students the love of learning and creating, and to empower them to discover and pursue their individual passions with knowledge, confidence, and caring to shape the future.