# Start College Now/Early College Credit Program Course Request Form

**Student Name:**_____

| ***Student*** **- complete columns 1, 2 & 3 below for each course** | | | ***AASD Curriculum Director*** **- complete columns 4, 5, 6 & 7 below** | | | |
|---|---|---|---|---|---|---|
| **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| **Course(s) and Alternates** | **College Course #** | **College Credits** | **Course Content is 80% Comparable to an AASD HS Course** | **Comparable HS Course** | **Approved** | **Denied (list rationale)** |
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| ***School Counselor*** **– Complete and Sign below** | **AASD Curriculum Director – Sign below** |
|---|---|
| Student's Cumulative GPA: _____ | AASD Curriculum Director Signature: |
| Student Has No Record of Disciplinary Problems: ❒ Yes ❒ No | _____ |
| School Counselor Signature: _____ Date: _____ | Date: _____ |