



2024-25 Parent/Guardian and Counselor Permission for Credit by Examination (CBE)

Student Last Name: _____ First Name: _____

Date of Birth: _____ Student ID: _____

Current Campus: _____ Grade: _____ Counselor: _____

Parent/Guardian Last Name: _____ First Name: _____

Email _____ Phone Number _____

Exams Requested (Counselor will approve): _____

Check the testing window the student desires to test and notice the deadline to register and complete testing.

- October - December* Deadline to register is October 4, 2024 Must test by December 2
January - March* Deadline to register is December 2, 2024 Must test by March 7
April - June (June testing suggested) Deadline to register is March 20, 2025 Must test by June 26
July (results needed prior to 25-26 schedules) Deadline to register is May 15, 2025 Must test by July 22

Please note that CBE scores must be in prior to the start of school for grade level and prior to the semester starting for courses. *High School students only

PARENT/GUARDIAN AGREEMENT

- 1. As the parent/guardian of the student identified on this form, I agree to the administration of the online remote credit by exams approved by the counselor.
2. I am aware that some exams have assignments that must be completed prior to testing. These assignments are found in the exam study guides for each test.
3. The credit by exams purchased by College Station ISD are nonrefundable and nontransferable and are purchased immediately after each registration deadline.
4. I understand that the student can only test each subject/course once per testing window.
5. I am aware that the student may only attempt the subject/course two times.
6. I give permission for my student to be accelerated if the passing score >=80% (K >=90%) is met.
7. I understand that beginning with students in the Class of 2027 CBE scores will be included in high school grade point average (GPA) per CSISD Board Policy EIC(LOCAL) - Academic Achievement: Class Ranking

Parent/Guardian Signature _____ Date _____

Student Signature: _____ Date: _____

COUNSELOR COMPLETES (College Station ISD)

- 1. Has the student received prior instruction in the course(s) listed below? yes no
2. Is student currently enrolled in College Station ISD? Yes No (Only students currently enrolled are eligible)
3. Credit-by-Exam to be ordered:
Full Battery (English Language Arts, Math, Science, Social Studies) for Grade K 1 2 3 4 5
Specific Subject _____ A and/or B
List any testing accommodations and attach documentation (Put N/A if not applicable for this student):

Counselor Signature

Date