Up to 1.0

Up to 1.0

Up to 1.0

Up to 1.0

Student Name:	Student ID #	Student ID #						
Current School: Currer	ool:Anticipated Year of G	ear of Graduation:						
List the course(s) for which you are requesting credit retrieval or course challenge:								
Course:		Year take	Year taken:					
Select which option you are using	g to show profic	ciency:						
State/National Asse	gher-level cours	е						
Please indicate on the table below which assessment you have taken and attach documentation to this form.								
	Score Required	Course Eligible	Credit Possible					
Grade 10 Smarter Balanced Assessment (SBA) Math	2595 or higher	Algebra or Geometry	Up to 1.0	-				
Grade 10 Smarter Balanced Assessment (SBA) English Language Arts (ELA)	2548 or higher	Freshman English or Sophomore English	Up to1.0					
Grade 11 Washington Comprehensive Assessment of Science	700 or higher	Physical Science, Biology or, Chemistry	Up to 1.0					
SAT Math SAT ERW	Min. 430 Min. 410	Algebra or Geometry Freshman English or Sophomore English	Up to 1.0 Up to 1.0					
ACT Math	Min. of 16	Algebra or Geometry	Up to 1.0	1				

Completion of Next Higher-Level Course Taken:\_\_\_\_\_

Min of 14

3,4 or 5

4, 5, 6 or 7

Min. of 146

Grade\_\_\_\_\_(.5 credit possible)

Freshman English or

Sophomore English

Subject Area of Test

Subject Area of Test

Subject Area of Test

Year Taken: \_\_\_\_\_

(Attach documentation to this form of course completion.)

ACT English

AP Testing

IB Testing

**GED Testing** 

My counselor has reviewed the following with me:

	I have added these courses and credits to my High School and Beyond Plan.										
	Credits that are listed as "PASS" on a transcript may have an impact on university entrance and/or meeting university entrance requirement. Please be sure to check with any colleges to make sure they will accept PASS grades for courses.										
	Credits that are listed as "PASS" on a transcript may impact NCAA eligibility for future college-athletes.										
	☐ Other options for earning credits such as summer school.										
	Requested By:				_						
	Student's Signature	Date	Parent's Sig	nature Date							
For office use only											
	Add: Course Name	Year		_ Credits Earned:							
Th	e request for credit recovery o	or credit challenge	is: (circle)	Approved	Denied						
Re	ason for denial:										
	☐ The request was not based	on documented or	verifiable ass	essment scores.							
	APPROVED BY:	Building regis Family notifie		Date:							
	Counselor D	Date	Principal	Date	_						