



Ector County Independent School District
Credit by Examination Application (CBE) – Grades K – 8

School ID# _____ Grade: _____ School: _____ CBE Date: _____

Last Name _____ First Name _____ MI _____

Students with **NO PRIOR INSTRUCTION**: The passing score for this credit by examination is **80 percent**. If credit is awarded the score and the credit shall be placed on the student's transcript and shall be used to calculate class rank.

Students with **PRIOR INSTRUCTION**: The passing score for this credit by examination is **70 percent**. Student may not have an academic grade lower than a sixty (60) and prior instruction must have been received through a Texas Education Agency accredited program.

Grades K-8: Students may be tested in Math, Language Arts, Science and Social Studies for acceleration with **NO PRIOR INSTRUCTION**. The passing score for this credit by examination is **80 percent**.
If a student fails to achieve **80 percent** on any test, all testing will be ended. **Only two tests will be ordered at a time.**

Grade to be tested for acceleration:
Circle One: Grade: K 1 2 3 4 5 6 7 8

Grades K-8 Students who have received **PRIOR INSTRUCTION** in a subject in elementary grades (prior instruction must have been received through a Texas Education Agency accredited program) and who have received a grade of at least 60 may use a credit by examination to demonstrate mastery of the essential knowledge and skills of the failed subjects.
The passing score for this credit by examination is **70 percent**. **Only two test will be ordered at a time.**

Student with PRIOR Instruction (Final grade in subject _____)
Circle One: Grade: K 1 2 3 4 5 6 7 8

Requests for CREDIT BY EXAMINATION (CBE) will be made and approved in writing (this application) by campus administrator and/or counselor. This application must be forwarded to the Testing Warehouse.

A study guide is available at <http://www.depts.ttu.edu/k12/current-students/forms/cbe-review-sheets/>.

Signature of authorizing school personnel: _____

The undersigned agree to abide by all guidelines for credit by examination in the Ector County Independent School District.
I agree to accept the score from all Credit-by-Exams that are administered.

Student: _____ Parent: _____ Date: _____



Ector County Independent School District
Credit by Examination Application (CBE) – Grades 9 - 12

School ID# _____ Grade: _____ School: _____ CBE Date: _____
Last Name _____ First Name _____ MI _____

Students with NO PRIOR INSTRUCTION: The passing score for this credit by examination is 80 percent. If credit is awarded the score and the credit shall be placed on the student's transcript and shall be used to calculate class rank.

Students with PRIOR INSTRUCTION: The passing score for this credit by examination is 70 percent. Student may not have an academic grade lower than a sixty (60) and prior instruction must have been received through a Texas Education Agency accredited program. If credit is awarded, the score and credit shall be placed on the student's transcript.

Grades 9-12: Each test covers a semester of the course and is approximately three (3) hours in length. Only two tests may be selected.

Session to be taken:

Check one: [] Student with NO PRIOR Instruction [] Student with PRIOR Instruction (Final grade in subject _____)

Subject to be taken: _____

Session to be taken:

Check one: [] Student with NO PRIOR Instruction [] Student with PRIOR Instruction (Final grade in subject _____)

Subject to be taken: _____

Requests for CREDIT BY EXAMINATION (CBE) will be made and approved in writing (this application) by campus administrator and/or counselor. This application will then be forwarded to the Testing Warehouse.

A study guide is available at http://www.depts.ttu.edu/k12/current-students/forms/cbe-review-sheets/.

Signature of authorizing school personnel: _____

The undersigned agree to abide by all guidelines for credit by examination in the Ector County Independent School District. I agree to accept the score from all Credit-by-Exams that are administered.

Student: _____ Parent: _____ Date: _____