



Application for Credit Flexibility Plan (CFP)

Student/Parent must complete all sections as instructed and submit completed application to assigned school counselor by March 1st.

Student Name: _____ Grade: _____

Student Phone Number: _____

Student Email: _____

Reason for pursuing a Credit Flexibility plan:

Answer the following questions by checking “yes” or “no” regarding your Credit Flexibility request.

	YES	NO
Are you on an IEP, 504 or Intervention Plan.		
Do you receive English Language services.		
Do you participate in any Rocky River High School sports?		
Will this decision affect your athletic eligibility?		
Will this decision affect your grade placement or graduation?		

Student Contract: The student and parent must read and initial each item below as an indication of acceptance.

Student	Parent/ Guardian	
		I understand that a student will hold primary responsibility for the overall success of the CFP.
		I understand that the RRHS Code of Conduct applies at all times during the completion of this CFP.
		I understand that the student will be removed from the Credit Flexibility Program for issues involving plagiarism and copyright violations and will be subject to school discipline.
		I understand that the student is expected to allocate and manage his or her time in working towards CFP completion.
		I understand that the student will be expected to independently fulfill the work required to complete the CFP.
		I understand that the student will be expected to update parents regarding his or her progress.
		I understand that the student must complete all CFP work by the due dates agreed upon in this contract.
		I understand that any grade earned as part of this credit flexibility option will be posted as a permanent grade on the student’s transcript.
		I understand that the student is responsible for maintaining academic, and NCAA if necessary, eligibility if s/he participates in RRHS athletics.

SIGNATURE SECTION

STUDENT

Your signature indicates that you have discussed the above statements with your parents, understand the commitment you are making, and agree to the policies set forth by Rocky River High School.

Student Signature: _____ Date: _____

PARENT/GUARDIAN

Please read & discuss the above statements as well as the Credit Flexibility Information and Guidelines with your student. Your signature indicates that you have read these and agree to the policies set forth by Rocky River High School. Your signature also relieves the school of any liability for your son/daughter during times in which your student is not required to be at school due to this flexible credit plan, should it be accepted.

Parent Signature: _____ Date: _____

CREDIT FLEXIBILITY PLAN (CFP)

I. GENERAL INFORMATION

Option: What will the student do to complete the plan and earn credit. Check ALL that apply.

- 1. Distance learning/Online coursework from an accredited institution
- 2. Self-created coursework/Independent study
 - Field experience
 - Internship/mentorship
 - Educational travel
 - Other _____
- 3. Credit by assessment for an existing RRHS or AP course

Course Title: _____

Institution that will assess and award transcribed credit if #1 is selected above:

Amount of credit desired for the plan (circle one): 0.5 credits 1.0 credit

Subject area of CFP: _____

Plan Completion Timeline (select one):

- Entire Academic Year
- Semester 1 only
- Semester 2 only
- Other _____

Plan beginning date: _____ Plan completion date: _____

The final grade for your CFP will be posted on your transcript and calculated into your GPA.

If your plan will be overseen by a Rocky River teacher of record, please list two check-in dates at which time you will present evidence that you are making progress in your CFP:

check-in date 1: _____

check-in date 2: _____

If your plan will be overseen by another individual in addition to a Rocky River teacher of record, list the name and contact information of the organization and/or individual supporting and supervising your proposed CFP.

Name: _____

Organization/Affiliation: _____

Phone Number: _____ Email: _____

II. DEMONSTRATION OF MASTERY OF STANDARDS

When successfully completed, a CFP allows a student to demonstrate that he or she has mastered all standards associated with a course. For each course, please complete the following chart. Add pages as necessary.

- Standards addressed: This column tells us, “What will the student study and learn?” In this column, please list the standards your course requires, each in its own box. Standards can be accessed at:
 - Ohio Department of Education Learning Standards: <http://education.ohio.gov/Topics/Learning-in-Ohio/OLS-Graphic-Sections/Learning-Standards>
 - AP course standards: <https://apstudent.collegeboard.org/apcourse>
- Activities I will do: This column answers the question, “How will the student accomplish this learning?” In this column, please detail the activities you will work on and complete that will lead to your demonstration of mastery of each standard.
- Assessment: This column answers the question, “How will the student demonstrate that the learning standard has been mastered and accomplished?” In this column, please explain how your learning of the standard will be evaluated and measured.

If you are completing Option 1: Distance Learning / Online Coursework from an accredited provider, you may attach the established syllabus in lieu of completing this chart. Please note, upon review, the CFC may determine that the course does not cover all of the standards covered in the same course at RRHS. In this case, the CFC will share the standards that will need to be addressed, and the student will then need to complete the chart for each standard indicated by the CFC.

III. CREDIT FLEXIBILITY COMMITTEE REVIEW of CREDIT FLEXIBILITY PLAN REQUEST (office use only)

APPROVED

NOT APPROVED

Comments: