

## Approval Form For New Work for Credit or Credit Recovery Courses

(This form and any supporting documentation must be submitted <u>at least one week prior</u> to the start date of the course.)

Student Na	ime:	Course Start Date:
Course(s):		High School:
Approved by: Principal, Guidance Counselor or Authorized School Representative:		
Name:		Title:
Email:		Phone Number:
Signatu	ire:	Date:
Approved by: Subject Area Supervisor (Example: Algebra requires Math Dept. Supervisor):		
Name:		Title:
Email:		Phone Number:
Signatu	re:	Date:

If the student is supported by an IEP or 504 Plan, this form also needs to be approved by the Child Team Case Manager or the 504 District Coordinator.

Is the student supported by an IEP or 504 Plan? Yes No

If yes, please attach a copy of the IEP, or letter of requested accommodations, and complete the approval below.

## Approved by: Child Study Team Case Manager or 504 District Coordinator

Name:	Title:
Email:	Phone Number:
Signature:	Date:

Once complete, click here to upload a .pdf copy of this form and documentation to your student account, or copy/paste the below into your browser.

(https://us-elevate.elluciancloud.com/app/bergen/f?p=1202:LOGIN)