



REQUEST FOR INITIAL CREDIT FOR NON-GCS COURSE

Current School Name: _____

A. STUDENT DATA

1. Student Name: _____ Student ID #: _____
2. Permanent Address: _____
3. Telephone (home): _____ Parent's Work #: _____
4. Current Grade: _____ 5. Anticipated Year of Graduation: _____
6. Name and Address of Institution: _____
 Is this an accredited agency?: YES - NO _____ If YES, provide the name of accrediting agency: _____
7. Dates of Attendance: _____

B. COURSE DATA

1. Course(s) for which Credit is Requested:
- | 2. Title of Course | Guilford County Course Equivalent |
|--------------------|-----------------------------------|
| A _____ | _____ |
| B _____ | _____ |
| C _____ | _____ |
| D _____ | _____ |

(Attach another form if credit for more than four courses is requested)

3. Total Amount of Credit Requested: _____
4. Please, attach the following documentation: course title(s), materials used, total number of contact hours per course, attendance record(s), and scores of any standardized tests associated with the specific course(s).
Credit cannot be granted if all required documentation is not submitted.

C. SIGNATURES

2. Parent/Guardian's Signature _____ Date: _____
3. Principal/Designee's Signature _____ Date: _____
5. Approval by High School Curriculum Officer _____ Date: _____
6. Request Denied: _____ Date: _____

_____ Content Not Equivalent

_____ Hours Insufficient

Special Note: Grades will be recorded as "Pass" (P) or "Fail" (F) and will be identified on the transcript as non-GCS grades. Grades and credits will not be included in the calculation of GPA or class rank.