

CREDIT FLEXIBILITY APPLICATION

Student's Name: _____ Current Grade: _____

Street Address: _____

Student ID: _____ Telephone: _____

C. COURSEWORK

3. **Online Learning**

Students will complete online coursework in various subjects at their own pace. Credit is awarded upon successful completion of the class. Students will be scheduled for this option as appropriate.

Name of course: _____

Institution or program offering the course: _____

Procedures:

1. Complete this application.
2. Return application to your school counselor.
3. Verify approval from CFHS administration and your school counselor.
4. Enroll in the class and successfully complete the class.
5. Submit verification of course completion and grade to school counselor.

For Office Use Only: Application Approved _____ Application Denied _____

School Counselor's Signature _____ Date _____

CFHS Administrator's Signature _____ Date _____
