McKinney ISD 2020 — 2021 Application for Credit by Examination

Date	Campus		Grade	Student	ID	Date of Birth	
First Name		MI	Last Name				
Address							
Phone				Email Address			
Does the student h that requires test r Yes				IDEA (Special Educat if applicable.	ion) Individual E	ducation plan	
Name of Credit by Examination #1				Purpose of Credit by Examination			
				Acceleration	With	Prior Instruction	
Name of Credit by Examination #2				Purpose of Credit by Examination			
				Acceleration	With	Prior Instruction	
Please select 1 date	e from the list belo	w, paying clo	se attention t	o each application de	adline.		
Kindergarten				$\frac{Grades\ 1-5}{^*\text{October and February testing dates will have a 2}^{\text{nd}}\ day\ scheduled\ at\ the\ campus\ of\ enrollment}$			
<u>Grades 6 - 12</u>			-				
If your child is orderi	ng a language exam,	please descrik	pe your child's e	experience with the lang	guage:		
			•	n, either for acceleration ted to the next level. Ple	•	struction. I agree that if	
Student's printed name and signature					Date		
Parent's printed name and signature					Date		
School Offical's print	ed name and signatu	ire		Date			

Campus Counselor or Principal, please return form to Deanna Tabor at dtabor@mckinneyisd.net.

^{**}Please remember that grades 6-12 can only register for <u>2 exams each date</u>. You would need to complete a different application for each testing window.