

Form 221.1 Request for Credit Recovery Application

Lloydminster Catholic School Division recognizes that learning is a continual process. Some students, with additional time and/or supports can demonstrate that they have met the outcomes of a particular high school course to a level that allows them to receive credit for the course, thus negating the necessity of retaking the entire course again.

Consent:

Student's Name: _____

Student's Ministry Number: _____

Student's Grade: _____

Course for which I am applying: _____

I understand I must have at least 40% in the course to request recovery. My mark was: _____

I understand I must have attained a minimum of 80% attendance to request recovery. _____

Signature: _____

Date: _____

For Office Use:

Approved (Principal signature): _____ Date: _____

Please attach all identified outcomes required to be completed for successful credit recovery. Also note how each outcome will be evaluated.

Approved (signature): _____

Complete the following after successful credit recovery.

Final Grade Submitted to the Ministry of Education: _____ (place this form in the student's cumulative file and fill in the Mark Correction Form)

Approved Teacher (signature): _____ Date: _____