

Credit by Demonstrated Mastery (CDM) <u>Student and Family Application</u>

Date of Application: ____/___/

STUDENT INFORMATION							
Name: Bir		rthdate:					
School:	Grade Level:	Stı	Student ID:				
Parent/Guardian Name:	Parent/Guardian Email:	Da	Daytime Phone:				
Circle semester of CDM request:	Fall Spring	Sun	nmer				
CREDIT BY DEMONSTRATED MASTE	RY APPLICATION						
I am requesting the opportunity to earn Credit for Demonstrated Mastery (CDM) for the following: (course name or subject).							
STUDENT/FAMILY AGREEMENT Please review the following regarding	g the CDM process:		Student Initials	Parent Initials			
I understand the CDM process cannot be used for credit recovery.							
I understand the CDM process will include a multi-phase assessment with Phase 1 and Phase 2.							
Phase 1 will include an examination to est foundational skills and content this course I must earn a minimum of 90% accontinue with the CDM process or appropriate state assessment, EO I have one attempt at the exam. Prior to the exam, I may review the course or subject area that I am seat www.ncdpi.edu	e/subject requires. curacy on the local exam t a "superior" scale score o C. e content standards for the	n the					

 If I earn the appropriate score, I will move will not have the opportunity to earn CDM 					
In Phase 2, I will create an artifact that reflects of content standards, including the ability to apply expected at the end of the course. • The school may require a presentation, passevidence of my abilities.					
The CDM Review Panel will make a recommendation for Phase II. If I am successful, I will earn a "Pass" on my transcript and one standard credit toward graduation. No grade or quality points will be granted and the "Pass" will not be included in my GPA. • CDM credit for CTE courses will not count toward articulation college credit					
I understand that I will meet with a CDM Panel member(s) to discuss the process and long-term implications of CDM.					
I understand that NCAA Division I and Division II colleges and universities do not recognize test-out credits in terms of meeting college entrance credit requirements, and therefore potential collegiate athletes are strongly encouraged to discuss the process and implications with their school counselor.					
I understand this is over and above my current course load. This is an independent process to be completed without any assistance from parent/guardian, teachers and staff.					
My parent/guardian and I will be allowed to file an appeal of Phase 2 if we do not agree with the decision of the team.					
I understand all of the above and agree to abide by the process defined above.					
Student Signature:	Date:				
Parent/Guardian Signature:	Date:				
For Office Use Only:	Date Received:				
Conference Date:	Other:				
In Attendance:	<u> </u>				