

College of Extended and Global Education and Chino Valley USD (CVUSD) Online High School Program - Summer 2022

Alternative Credits Toward Graduation Contract

- · · · · · ·	m communicating the need to request Extended and Global Education and Chir		3	ract with CSUSB College of			
This contract sets forth the procedure I mu College of Extended and Global Education academic schedule.							
Name of Cou	rse:	Semester: 1st 2nd					
Reason for external credit request (attach o	copy of student's transcript):						
Rem	ediation Acceleration	Impact	Schedule				
All coursework taken with CSUSB College of	of Extended and Global Education and CV	'USD's Online High Schoo	ol Program meets Californ	ia state content standards.			
I	_ understand that the course criteria m	oust be met to ensure tha	et my child	Student Name			
By signing this contract the parent/guardia and CVUSD's Online High School Program a obtaining prior approval from their district Registration fees are non-refundable	and agrees to adhere to all requirement and/or home school site to ensure that	s stated herein. The stud	ent's also understands th				
Home So	chool District:						
Home So	chool Site:						
Parent G	uardian Signature:						
Student	Signature:						
Upon completion of student's course(s) a re	eport card will be issued by Chino Valley	y USD and a copy will be	mailed to the school offic	ial named above site.			
☐ I do n	ot want this course added to my studer	nt's transcript (course is f	or survey/practice only).				
By signing below the student's home school Global Education and CVUSD's Online High below I give the above named student app	School Program. Upon approval studen		-	_			
Counselor's Approval:		Date:		Approve			
Principal's Approval:		Date:		Approve			





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Course Agreement

g. Comment								
Student Inform	nation							
Student's Name		Grade		DOB	Student ID#			
Home School	1			r				
Contact #				mail				
Parent/Guardian				nail				
Course Information								
Course Title			Semester/Session					
Course Activity Information:								
Date	Student Grade Book Sheet		Total Days		Total Hours			
	See Attached							
	(Teacher will attach work sample)							
By signing this agreement I understand I will receive credit for the course listed above. By signing this agreement I understand this course will NOT be taken for course credit.								
Student Signature Date								
FOR OFFICE USE ONLY Student Attendance								
☐ No Orientation ☐ Student has missed 3 days ☐ Student dropped course Last Day Attended								
GRADE SUMMARY:								
The above student earned credits in Grade						Grade		
The Teacher's	The Teacher's Printed NameSignature							
Grade Posted By Date								
•						•		





College of Extended and Global Education and Chino Valley U SD Online High School Program (CVUSD) - Summer 2022 Transcript Request Form

tuder	nt's Last Name:		Student's First Name:				
Date of Birth (MM/DD/YYYY):			Grade Level for 2022 - 2023 school year:				
Parent/Guardian First Name:			Parent/Guardian Last Name:				
Mailing Address:			City:				
'ip:	Co	ntact Number:					
	☐ I do r	not want this course added to	o my student's transcript (course is for survey/practice only).				
		Tra	anscript Information				
	Agreement with their instr	uction in order to receive a grad	litional transcripts will be charged a fee of \$7.00. Students must complete a Course e. Students who receive a "NG" (No Grade) will NOT receive a transcript and their ed School District's Alternative Education Department.				
	Email Transcript	Mail Transcript	Pick Up Transcript: Location: Alternative Education Center 15650 Piperline Ave, Chino Hills 91709				
	Transcript to be Maile	d/Emailed to:					
		Parent Name or School	ol Site:				
		Attention:					
		Address:					
		City:					
		Email Address:					
Cı		Current School Couns	Current School Counselor:				
	Course Student is Reg	istered for:					
			Semester:				
	or stolen. Additional trans Extended and Global Educa	scripts can be requested for a \$7 tion Office at (909) 537 - 5907.	I course date. CSUSB/Chino Valley USD is not responsible for transcripts that are lost 7.00 fee by faxing a Transcript Request Form to Cal State San Bernardino's College of Once a request has been received a member of the College of Extended and Global nd receive payment. Please email completed form to ohsprogram.pace@csusb.edu				
		DO	FOR OFFICE USE ONLY NOT WRITE BELOW THIS LINE				
	Date Requested Received: _ Processed By:						



Date Mailed: __