

Edgenuity Application

Student: _____

Course: _____ Level _____

Teacher of Record: _____

Is this course being taken for original credit? _____ YES _____ NO

If yes, why? _____

If it is a repeat, at which level did the student take the class originally?

_____ ST _____ ADV _____ HON / Original Grade: _____ / Teacher _____

Student will be taking: _____ The Entire course _____ Certain units which include:

SOL Information:

_____ This course does not require an SOL

_____ Student has already passed the SOL

_____ Student needs to take the SOL - Testing coordinator has been notified _____

Date

Edgenuity courses in Albemarle County are NOT cleared by the NCAA. This student is not considering becoming a Division I or II Athlete, and does not need this course to go through the NCAA Eligibility Center.

I do not intend to register with NCAA to play sports in college for D1 or D2 schools.

Student: _____ Parent: _____

Counselor: _____ Administrator: _____