

Course Acceleration Request/Checklist

Student Name:	Student Number:
School:	Current Grade Level:
Date of Request:	School Year:
Parent Name:	Counselor Name:
Requested Course for Acceleration: _____	
<p>Considerations reviewed with Parent: Date of conference: _____</p> <ul style="list-style-type: none"> ○ Accelerated coursework becomes a part of your student’s permanent record. ○ Your student will still be responsible for mastering all standards in their current grade level courses and will be required to take their current grade level FSA and/or EOC. Integrated curriculum standards (such as literacy and social studies) may be missed through acceleration yet covered on future assessments required for middle school promotion. ○ ACCEL options do not supersede the promotion requirements of 1003.4156 F.S. ○ Parental involvement in the entire process of accelerated coursework is necessary for student success. ○ Your student should have excellent study skills, be self-motivated, and be able to work independently. ○ Your student may be taking the virtual course at school working independently, with no direct assistance from an on-site instructor. 	
<p>Eligibility Requirements:</p> <ul style="list-style-type: none"> ○ Review of academic history. ○ A/B honor roll with an “A” in the course requested to accelerate. ○ Parent/Teacher/Counselor/Principal Recommendations. ○ 5 FSA level from previous year in Reading or Math. ○ Demonstrate proficiency for course placement. 	
<p>Recommendation:</p> <p><input type="checkbox"/> Agrees* <input type="checkbox"/> Disagrees Parent Signature: _____</p> <p><input type="checkbox"/> Agrees* <input type="checkbox"/> Disagrees Teacher Signature: _____</p> <p><input type="checkbox"/> Agrees* <input type="checkbox"/> Disagrees Counselor Parent Signature: _____</p> <p style="text-align: center;">* Agreement includes consent for appropriate student testing if required</p>	
Additional criteria for consideration: 	
Send Completed Form to the Director for Instructional Services	