

Thomas Edison Energysmart Charter School

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## Option 2 Application Form

**Deadline to submit for approval for Summer or Next Academic Year :  
May 1st, 2017**

## Request for Approval of Coursework (OPTION II)

Date: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Course/Program to be Taken: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Location: \_\_\_\_\_

Dates of Coursework (start date to finish date): \_\_\_\_\_

### Reason for Request (Check):

\_\_\_\_\_ Advance a course level in a given sequence for upcoming school year/college course pre-requisite.

\_\_\_\_\_ Recover credit in a previous course in which credit was not received .

Is this coursework an elective or a core graduation requirement?

\_\_\_\_\_ Elective

\_\_\_\_\_ Graduation Requirement

### The Option II Experience will be satisfied through:

\_\_\_\_\_ College Course Work

\_\_\_\_\_ Online Course Work

**Mandatory:** Equivalent TEECS course to which the standards will be matched and for which credit will be earned: \_\_\_\_\_

If the course is approved, \_\_\_\_\_ credits will be awarded upon proof of successful completion.

**Option II experiences do not count toward grade point average (GPA).**

Attach the course syllabus, description, a statement regarding the NJ Students Learning Standards to be addressed, how the experience will be assessed, and any other information that will support this request. Rationale for Request:

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The responsibility for the successful completion of coursework taken rests with the student and parent/guardian.

Costs/fees are the responsibility of the student/parent.

Option II opportunities are primarily for High school students. However, 7th and 8th graders' applications will be reviewed upon consultation with the guidance counselor.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Curriculum and Instruction Supervisor ( Middle and High) Date: \_\_\_\_\_

Route this Form to \_\_\_\_\_ (Lead Person) for Final Approval

Signature of Lead Person : \_\_\_\_\_ Date: \_\_\_\_\_