



# Request for Personal Curriculum

Student Information (Complete all sections)	
Student:	Current Grade:
Birth Date:	
Parent/Guardian:	
Request By: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Student with Adult Status	
School:	School Counselor:
Anticipated Graduation Date:	Date of Request for Personal Curriculum:
<input type="checkbox"/> Student has an Educational Development Plan (EDP)	<input type="checkbox"/> Student has a current Individual Education Program (IEP)

Request Information	
Reason for Request: <input type="checkbox"/> Desire to take credit(s) beyond the required credits in English Language Arts, Math, Science or World Languages <input type="checkbox"/> Math modification <input type="checkbox"/> Transfer from out-of-state or nonpublic school <input type="checkbox"/> Need related to a disability which is special education eligible	Describe Rationale:

Personal Curriculum Request (Select what area(s) of the MI Merit Curriculum are in need of modification)	
Mathematics - ___ credits <input type="checkbox"/> Algebra I <input type="checkbox"/> Geometry <input type="checkbox"/> Algebra II <input type="checkbox"/> Additional Math/Math Related Credit	English Language Arts - ___ credits (only for student with an IEP) <input type="checkbox"/> Grade 9 <input type="checkbox"/> Grade 10 <input type="checkbox"/> Grade 11 <input type="checkbox"/> Grade 12
Social Studies - __ credits <input type="checkbox"/> World History/Geography <input type="checkbox"/> U.S. History/Geography <input type="checkbox"/> Economics	Science - __ credits (only for students with an IEP) <input type="checkbox"/> Biology <input type="checkbox"/> Chemistry or Physics <input type="checkbox"/> Additional Science Credit
Physical Education/ Health - __ credit <input type="checkbox"/> Physical Education <input type="checkbox"/> Health	World Language - __ credits (begins with class of 2016) (only for student with an IEP) <input type="checkbox"/> _____ <input type="checkbox"/> _____
Visual, Performing, or Applied Arts - __ credit <input type="checkbox"/> _____	Online Learning Experience - 20 hours in grades 6- 12 (only for students with an IEP) <input type="checkbox"/> _____

Signatures		
Requested By:	Signature:	Date:
Received By:		Date: