

CREDIT REVIEW COMMITTEE OVERRIDE RECOMMENDATION

Student _____ Date of Birth _____
Address _____ Parent/Guardian _____
Home Phone _____ Business Phone _____

I. Override recommendation:

II. To be completed by committee members:

1. Explain why the standards and procedures that are used with the majority of students resulted in invalid findings for this student.

2. What data were used to conclude that the student should be placed in a specific grade level or should receive a unit of credit?

3. Explain why the data selected for recommending the override had greater relative importance than the achievement test data and minimum competency test data used by the district.

III. Signatures of grade placement committee members agreeing with the override recommendation.

_____	_____	_____	_____
Title	Date	Title	Date
_____	_____	_____	_____
Title	Date	Title	Date

IV. List the names and positions of those committee members who are not in agreement with the override recommendations.

*	_____	_____
	Name	Position

*	_____	_____
	Name	Position

*Must attach a written statement of why they disagree with the override.