



Online High School Program - Summer 2024

Alternative Credits Toward Graduation Contract

I \_\_\_\_\_ am communicating the need to request alternative credits and will be entering into a contract with Orion International Academy.
Student's Name

This contract sets forth the procedure I must follow for credit being granted toward high school graduation of coursework successfully completed through Orion International Academy for the purposes of remediation, acceleration, or because of an impacted academic schedule.

Name of Course: \_\_\_\_\_ Semester: [ ] 1st [ ] 2nd

Reason for external credit request (attach copy of student's transcript):

[ ] Remediation [ ] Acceleration [ ] Impact Schedule

All coursework taken with Orion International Academy Online High School Program meets California state content standards.

I \_\_\_\_\_ understand that the course criteria must be met to ensure that my child \_\_\_\_\_ receives the appropriate credit for their online coursework.
Parent/Guardian Name Student Name

By signing this contract the parent/guardian requests that the pupil be allowed to complete course(s) offered Orion International Online High School Program and agrees to adhere to all requirements stated herein. The students also understand that he/she is responsible for obtaining prior approval from their district and/or home school site to ensure that the credits earned will be honored.

Registration fees are non-refundable.

Home School District: \_\_\_\_\_

Home School Site: \_\_\_\_\_

Parent Guardian Signature: \_\_\_\_\_

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

Upon completion of student's course(s) a report card will be issued by Orion and a copy will be mailed to the school official named above site.

[ ] I do not want this course added to my student's transcript (course is for survey/practice only).

By signing below the student's home school site, counselor or principal approve the course(s) and coursework being offered by Orion International Academy Online High School Program. Upon approval, the student is responsible for returning this form to their course instructor. By signing below, I give the above named student approval to enter into this contract:

Counselor's Approval: \_\_\_\_\_ Date: \_\_\_\_\_ [ ] Approve

or

Principal's Approval: \_\_\_\_\_ Date: \_\_\_\_\_ [ ] Approve