## Morris Hills Regional District Adult High School Out-Of-District Credit Recovery Program Procedures

- 1. The guidance counselor of the sending district identifies students in need of the Adult High School Credit Recovery Program (CRP) (specs on registration form).
- 2. Supervisor of Guidance submits candidates to be reviewed by the Chief School Administrator of their district.
- 3. Chief School Administrator signs Agreement of Participation form.
- 4. The signed Agreement of Participation along with Student Credit Recovery Program registration form and student's official transcript and any disciplinary records will be sent to the Morris Hills Regional Adult High School Coordinator's office at:

### MHRD Adult High School 50 Knoll Drive Rockaway, NJ 07866

- a) Alternatively, the student could bring all aforementioned forms with them at the time of registration or all forms could be faxed to (973) 586-3550.
- 5) The Adult High School Coordinator will have these records reviewed by the Chief School Administrator and Principal of the MHRD Adult High School and signed, if acceptable.
- 6) The Coordinator will develop a schedule for the CRP student.
- 7) Progress reports and final grades will be sent to each school's Supervisor of Guidance. A final end of semester report will be distributed to the Supervisor of Guidance at each school.
- 8) Credit Recovery students who are enrolled in Semester 2 must complete all work including final exams no later than the first week of June in order to be granted course credit(s).
- 9) Supervisors of Guidance must notify Adult High School Coordinator of withdrawals from school/program.

# Morris Hills Regional Adult High School Credit Recovery Program Chief School Administrator Agreement Letter

As Chief School Adminis	strator of	High	High School, I agree		
	(School N	lame)	•		
to allow	dent Name)	to take the following	ig course(s) at		
,	,				
MHRD Adult School for the					
	(Select One)	(School	ol Year)		
1.					
2					
I understand that the stu	ident will not be able to ta	ake more than 10 credi	its per semester at your		
institution and that the fe	ee vou have established	of <b>\$195.00</b> per course	will be charged to the student		
	•	•			
The participating studen	t's complete academic a	nd disciplinary records	have been forwarded to the		
Morris Hills Regional Dis	strict.				
Chief School Adminis		James Jene			
Sending District	•	Chief School Adm Receiving D			

### Morris Hills Regional Adult High School Credit Recovery Program Student Registration Form

### **Demographic Information**

Semester of Enrollment:	Fall	Spring	Year of Enrollment	:		
Student Name:		Sex:	Male	Female		
Address:						
(Street)		(City)	(State	) (Zip)		
Date of Birth:		Phone	e (C):			
Parent Email:						
Student Email:						
Current Grade Level: F	reshman	Sophomore	Junior	Senior		
School Information						
Current School:						
School Address:						
(Street)		(City)	(State	) (Zip)		
Guidance Counselor:	Counselor Email:					
Course Information						
Requested Courses: 1) 2)						
Reason for Enrollment (attendance, non passing grade. etc.):						
By signing below, I certify that I hat the Program Procedures. I further are grounds for removed from the	understand that fa					
Parent Signature		Stud	dent Signature			
Supervisor of Guidance		AHS	Coordinator			