

University of La Verne and Chino Valley (CVUSD)

Online High School Program - Summer 2023

Alternative Credits Toward Graduation Contract

I	<u> </u>	d to request alternative credits and will be er	tering into a contract with ULV
Student's Name	and Chino Valley USD's On	iline High School Program.	
·		ranted toward high school graduation of cour emediation, acceleration, or as a result of an in	, ,
Name o	f Course:	Semester:	Ist 2nd
Reason for external credit request (at	ttach copy of student's transcript)):	
	Remediation A	cceleration Impact	Schedule
All coursework taken with ULV and C	.VUSD's Online High School Prog	gram meets California state content standards.	
1	understand that the cou	rse criteria must be met to ensure that my ch	nild
Parent/Guardian Name receives the appropriate credit for the			Student Name
, , , ,	s stated herein. The student under onored.	• • • • • • • • • • • • • • • • • • • •	LV and CVUSD's Online High School Program and aproval from their district and/or home school site to
Home School District:		Home School Sit	e:
Parent Guardian Name:		nature:	
Print Sudent Name:		Student Signature:	
Upon completion of student's course	(s) a report card will be issued by	y Chino Valley USD and a copy will be mailed	to the school official named above site.
	I do not want this course added	d to my student's transcript (course is for sur	vey/practice only).
			ing offered by ULV and CVUSD's Online High below, I give the above-named student approva
Counselor's Approv	ral:	Date:	Approve
Print Counselor's N	lame:		
Principal's Approva	al:		Approve
Print Principals' N	lame:		

University of La Verne

University of La Verne and Chino Valley USD (CVUSD) Online High School Program - Summer 2023

Course Agreement					
Student Infor	mation				
Student's Name		Grade	DOB	Student ID#	
Home School			Counselor		
Contact #			Student Email		
Parent/Guardian	ardian		Parent Email		
	Co	ourse In	formation		
Course Title			Semester/Sessio	on	
Course Activity	Information:				
Date	Student Grade Book Sheet		Total Days	Total Hou	rs
	See Attached				
	(Teacher will attach work sample)				
	y signing this agreement, I unders				
	Student Signature			Date	
			icė use only Attendance		
GRADE SUMMA	o Orientation	sed 3 day	Last Day Attended	☐ Student dropped cours	E
	tudent earned credits in _				Grade
•					
The Teacher's Printed Name Signature Date Date					
				<i>ــــــــــــ</i> ــــــــــــــــــــــــ	

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University of La Verne and Chino Valley USD
Online High School Program (CVUSD) - Summer 2023
Transcript Request Form

nt's Last Name:		Student's First Name:		
of Birth (MM/DD/YYYY): Grade Level for 2022 - 2023 school year:		•		
ent/Guardian First Name:		Parent/Guardian Last Name:		
g Address:		City:		
Conta	ct Number:			
☐ I do not v	vant this course added to	my student's transcript (course is for survey/practice only).		
	Tra	nscript Information		
Agreement with their instruction	in order to receive a grade	tional transcripts will be charged a fee of \$7.00. Students must complete a Course a. Students who receive a "NG" (No Grade) will NOT receive a transcript and their ed School District's Alternative Education Department.		
Email Transcript	Mail Transcript	Pick Up Transcript: Location: Alternative Education Center 15650 Pipeline Ave, Chino Hills 91709		
Transcript to be Mailed/Em	ailed to:			
	Parent Name or Sc	hool Site:		
	Attention:			
	Address:			
	Email Address:			
		elor:		
Course Student is Registere	nd for:			
Course student is registere		Semester:		
stolen. Additional transcripts ca	n be requested for a \$7.00 has been received a meml	course date. ULV/Chino Valley USD is not responsible for transcripts that are lost or fee by faxing a Transcript Request Form to the University of La Verne OHS office at ber of the University of La Verne OHS office staff will contact you to verify the		
1 /		FOR OFFICE USE ONLY NOT WRITE BELOW THIS LINE		

Date Mailed: _____

University of La Verne

The University of La Verne and Chino Valley USD (CVUSD) Online High School Program-Summer 2023 Online Student Program Registration

Please review all information, including course codes on our website, https://hsp.laverne.edu/courses before registering. All courses require students to have their school site and/or district office complete an Alternative Credits Towards Graduation form prior to registering and paying course registration fees. Students will be responsible for providing this form to their course instructor on the first day of class.

Fees paid for courses are Non-Refundable.

Please complete the information below.

Student Information				
Last Name				
First Name				
Middle Name				
Mailing Address				
Birthdate				
Home/Cell Number				
Email Address				
Parent/Guardian Information				
Last Name				
First Name				
Mailing Address(If different from above)				
Home/Cell Number				
Email Address				
Contact Person in Case of Emergency				
Contact Person's Phone Number in Case of Emergency				
School Information				
Student's Home School Site				
Student's School Site Counselor				
Student's Grade level (2022-2023 school year)				
*Official Transcript mailed to				
List the Course Title and Course Code you are registering for				

Parent/Guardian

Please note: The University of La Verne in partnership with CVUSD's Online High School Program provides academically rigorous course work and will require a serious commitment on the part of the student.

My signature below indicates that I have read, understand, and agree with the information below:

- I give my son/daughter permission to participate in the University of La Verne in partnership with CVUSD's Online High School Program and that they understand they must complete the course and final exam to receive a grade.
- I understand prior approval from the student's school site and/or district must be received before registering for any course. Failure to receive prior approval may result in course credit(s) not being accepted by the home school site.
- I understand that all fees are Non-Refundable.

Parent Signature:	Date
i di citi digitatui c.	Date