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| **Fruitport High School**  357 N.Sixth Street  Fruitport, MI 49415  231-865-3101 | **REQUEST FOR PERSONAL CURRICULUM FOR STUDENTS WITH AN**  **INDIVIDUALIZED EDUCATION PROGRAM (IEP)** |  |
| DIRECTIONS: This page is to be completed by parent(s), guardian(s), adult student and/or school personnel and submitted to the student’s counselor or designee for consideration of a personal curriculum (PC). |

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| **1.** | | **STUDENT INFORMATION –** *Complete all sections* | | | | | | |
| Name of Student: | | | | | | | Grade: | |
| Anticipated Graduation Date: | | | | School: | | | Birth Date: | |
| Requested By: ☐ Parent ☐ Guardian ☐ Student (18 or older) ☐ School Personnel | | | | | | | | |
| Name of Requestor: | | | | | | | Daytime Phone: | |
|  | **2.** | **MODIFICATION REQUEST –** *Select what area(s) to Michigan Merit Curriculum are in need of proposed modification(s).* | | | | | | | |
|  | English Language Arts –  (4 Credits)  ☐ Grade 9  ☐ Grade 10  ☐ Grade 11  ☐ Grade 12 | | Mathematics -  (4 Credits)  ☐ Algebra I  ☐ Geometry  ☐ Algebra II  ☐ Math 4th Year | | Online Learning Experience (1 Credit)  ☐ | | | Physical Education & Health – (1 Credit)  ☐ PE  ☐ Health | |
|  | Science –  (3 Credits)  ☐ Biology  ☐ Chemistry or Physics  ☐ Additional Science | | Social Science –  (3 credits)  ☐ World History/Geography  ☐ US History Geography  ☐ Economics  ☐ Civics | | Visual, Performing & Applied Arts – (1 Credit)  ☐ | | | World Language –  (2 Credits)  ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **3.** | | **ASSURANCE OF PERSON REQUESTING PERSONAL CURRICULUM –** *Check the box after reading statement* | | | | | | |
| The Michigan Merit Curriculum (MMC) requires that the student earn specific credits to graduate from high school. Credits are earned when the student demonstrates competencies in content expectations in the given subject areas. The law allows certain modifications of these credits and/or expectations through the development of a Personal Curriculum (PC). A Personal Curriculum Committee will meet to determine eligibility and modifications that are consistent with student needs and district requirements/policy. | | | | | | | | |
| ☐ | | I understand that modifications to the Michigan Merit Curriculum may limit the student’s readiness to be admitted to college, be eligible for college scholarships, enter trade school, secure a job in a career choice, or be eligible for NCAA athletic programs. | | | | | | |
| ☐ | | I understand major modifications to the MMC may not result in a Michigan diploma. | | | | | | |
| ☐ | | As an emancipated student who has chosen to participate in a PC, it is my responsibility to maintain communication quarterly with teachers regarding the areas of modification. | | | | | | |
| ☐ | | I understand that the student may or may not be eligible for further consideration of a PC, even though a PC is requested. | | | | | | |
| ☐ | | I understand that if the student does not fulfill the approved Personal Curriculum, the PC is null and void; the student is obligated to make up the classes that were waived by the PC to be eligible to graduate. | | | | | | |
| **4.** | | **SIGNATURES** | | | | | | |
| **Requested By:** | | | | | | **Date:** | | |
| **Received By:** | | | | | | **Date:** | | |

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| **Fruitport High School**  357 N.Sixth Street  Fruitport, MI 49415  231-865-3101 | **PERSONAL CURRICULUM PLAN FOR STUDENTS WITH AN INDIVIDUALIZED EDUCATION PLAN** | Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| DIRECTIONS: This form is to be completed by the Personal Curriculum Committee. The PC Committee completes items #1 through #5. Box #6 is reserved for the superintendent, chief executive or designee. |

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| **1.** | | **STUDENT INFORMATION –** *Complete all sections* | | | | | | | | | |
| Name of Student: | | | | | | | | Birth Date: | | | Current Grade: |
| School: | | | | | | | | Counselor: | | | |
| Date of PC Request: | | | | | | | | Anticipated Graduation Date: | | | |
| **2.** | **STUDENT CAREER PATHWAY** (*As indicated on the most recent EDP*) | | | | | | | | | | |
| Student’s Post-School Goal: | | | | | | | | | | | |
| List Three Possible Careers: | | | | | 1. | | 2. | | | 3. | |
| Choose interested career pathways if applicable: | | | | | | | | | | | |
| ☐ Health Services | | | | | ☐ Human Services | | | | ☐ Natural Resources and Agri-science | | |
| ☐ Arts and Communications | | | | | ☐ Business Managements, Marketing and Technology | | | | ☐ Engineering/Manufacturing and Industrial Technology | | |
| **3.** | | **CREDIT MODIFICATION(S) REQUESTED –** *Complete all sections that apply* | | | | | | | | | |
| **A. MMC ENGLISH LANGUAGE ARTS CREDIT MODIFICATION\*** | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **B.** **MMC MATH CREDIT MODIFICATION**\* | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **C**. **MMC ONLINE LEARNING EXPERIENCE CREDIT MODIFICATION** \* | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **D. MMC PHYSICAL EDUCATION/HEALTH CREDIT MODIFICATION \*** | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **E.** **MMC SCIENCE CREDIT MODIFICATION** \* | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **F**. **MMC SOCIAL SCIENCE EDUCATION CREDIT MODIFICATION** \* | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **G.** **MMC VISUAL PERFORMING ARTS CREDIT MODIFICATION** \* | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **H.** **MMC WORLD LANGUAGE CREDIT MODIFICATION**\* | | | | | | | | | | | |
| Modified Content/Course: | | | | Justification Statement: | | | | | | | |
| **4.** | | | **COMMITTEE MEMBERS’ SIGNATURES –** *Signature indicates participation in development and/or agreement with the plan* | | | | | | | | |
| REQUIRED PC COMMITTEE MEMBERS | | | | | | OTHER MEMBERS | | | | | |
| Student: | | | | | |  | | | | | |
| Parent/Guardian: | | | | | | Other: | | | | | |
| Parent/Guardian: | | | | | | Other: | | | | | |
| Teacher or Counselor: | | | | | | Other: | | | | | |
| Principal: | | | | | | Other: | | | | | |

*\*Teacher should be directly educating the student and have expertise in the subject area being modified.*

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| **5.** | **PARENT/GUARDIAN/STUDENT COMMITMENT** | | |
| ☐ I/We agree with this personal curriculum plan and understand it needs district approval in order to be implemented. I also understand that the district may deny the PC and that if this happens all MMC requirements would be back in place. | | | |
| ☐ I/We understand that modifications made to the Michigan Merit Curriculum with a PC are based on a student’s current post-school goal and that the PC may need to be amended if that goal or career pathway changes. | | | |
| ☐ I/We understand that if the student does not fulfill the approved Personal Curriculum, the PC is null and void; the student is obligated to make up the classes that were waived by the PC to be eligible to graduate. | | | |
| ☐ I/We understand that modifications to the Michigan Merit Curriculum may limit the student’s readiness to be admitted to college, be eligible for college scholarships, enter trade school, secure a job in a career choice, or be eligible for NCAA athletic programs | | | |
| Signature of Student: | | | Date: |
| Signature of Parent/Guardian: | | | Date: |
| Signature of Parent/Guardian: | | | Date: |
| **6.** | **DISTRICT COMMITMENT** | | |
| ☐ I approve this personal curriculum plan for implementation. | | | |
| ☐ I deny this personal curriculum plan for implementation. See Explanation below. | | | |
| Signature of Superintendent/Designee | | Date: | |
| Actual implementation date (Month/Day/Year) OR the first day of the school year. | | | |