

CREDIT RECOVERY-ATTENDANCE PLAN FOR ADMISSION

Student Name: _____ High School: _____

Counselor Section – please complete based on your records and meeting with the student:

1. Please list the credits that this student is missing and/or currently failing, and specifically state how and when this student will make up these credits prior to attending Great Oaks (*i.e. summer school, online courses, credit recovery...*)

Course	Recovery Plan	Expected Completion Date

2. Is this student currently enrolled in a credit recovery program at your school?

No Yes

If you checked "Yes", list the courses that this student is currently recovering:

Student Section – please complete

1. Please explain why you are missing credits. If you have failed classes, or are currently failing classes, please explain:

2. Great Oaks' expectation is 95% attendance to prepare students to be college and career ready. If past poor attendance is the issue what are some goals you have to improve your attendance:

*Please do not submit this plan without all signatures requested below.

*By signing below, you are committing to this plan. All Credit Recovery Commitment Plans must be approved by Great Oaks. Once a plan is approved, acceptance into a program at Great Oaks will be **conditional** upon completion of this plan. Any additional course deficiencies that occur after the submission of this plan must also be addressed.*

Please contact Julie Beis @ beisj@greatoaks.com or 513-612-5794 for more information

Student Signature: _____ Date _____

Parent Signature: _____ Date _____

Counselor Signature: _____ Date _____