

## **Personal Curriculum Modification**

Student Information (Complete all sections)			
Student:		Birth Date:	
Parent/Guardian:			
Request By:  Parent  Leg	al Guardian	Student with Adult Status	
School:		School Counselor:	
Current Grade:		Anticipated Graduation Date:	
Date of Request of PC:		Date of PC Meeting:	
Request Information			
Reason for Request:		Student has an Educational Development Plan (EDP)	
Desire to take credit(s) beyond the required credits in			
English Language Arts, Math, Science or World Languages		Postsecondary Plan	
☐ Math modification		□Career or Life Goals	
☐ Transfer from out-of-state or nonpublic school			
Developed Curriculum Dequest (Select what ever(a) of the MI Marit Curriculum are in need of modification)			
Personal Curriculum Request (Select what area(s) of the MI Merit Curriculum are in need of modification)			
Physical Education/ Health credit		Social Studies – credits	
Physical Education		□ World History/Geography	
		U.S. History/Geography	
Class used for modification:		Class used for modification:	
Mathematics credits		Visual, Performing, or Applied Arts credit	
<ul> <li>Algebra II</li> <li>Additional Math/Math Related Credit</li> <li>1.</li> <li>2.</li> </ul>		Class used for modification:	
		Science – credits (out of state transfer students only)	
		☐ Biology	
Z		Chemistry/Physics	
Signatures	0		Dut
Guardian:	Signature:		Date:
Student: Signature: Counselor: Signature:			Date:
			Date:
Other: Signature:			Date:
Superintendent or Designee Commitment/Implementation			
Approve this Personal Curriculum Plan and Implement			
Reject this Personal Curriculum Plan			
Superintendent/Designee: Date:			
PC Plan Implementation Date:			