## WHITNALL SCHOOL DISTRICT YOUTH OPTIONS

## Eligibility:

The Youth Options Program is available to Wisconsin public school juniors and seniors who meet the following requirements:

- 1. Have completed the 10th grade;
- 2. Good academic standing and have an acceptable disciplinary record;
- 3. Apply to the postsecondary institution in the school semester prior to the one in which the student plans to attend the postsecondary school
  - a. Fall Course/Semester 1 ~ paperwork needs to be submitted to the District Office no later than March 1<sup>st</sup> for enrolling in the following school year
  - b. Spring Course/Semester 2 ~ paperwork needs to be submitted to the District Office no later than October 1<sup>st</sup> for the current school year
- 4. Submit form PI-8700-A notifying the school board of the student's intention of enrolling in a post-secondary institution. Maintain satisfactory attendance and comply with the compulsory school attendance law under §118.15(1)(a), Wis. Stats.

SCHOOL YEAR:	Semester 1	Semester 2
Student Name:		Grade Level
Name of Course:		
(a separate form must be fill out for each course).		
Department (i.e. Math, English, Science)		
Technical School/ College / University where c	class will be taken	
Please explain your post high school academic options program will help accomplish your goa	_	w participating in this youth

## Please attach the following completed forms with this to guidance for district approval:

PI- 8700-a Youth Options Program Plan and Report

Form is available at: <a href="http://youthoptions.dpi.wi.gov">http://youthoptions.dpi.wi.gov</a>

**DEADLINE** for Submission is **October 1** (to enroll in a spring semester course) and **March 1** to enroll in a fall semester course.

Upon notification of approval from the Whitnall School District on the PI-8700-a form, the **student** is responsible completing admission forms to the selected college / youth option program. Students must meet all entrance requirements to that institution. Students are responsible for enrolling in the program, registering for classes, and submitting a transcript to WHS upon completion of the course. Student Signature I understand that if my child does not earn a passing grade or does not finish the class, I will be responsible for the cost of the class. \_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_ Parent Signature **Counselor Signature** WHS Department Chair signature Principal Signature *Guidance office section:* 

State Course Code:

Course Rigor: [B = Basic] [G = General] [E = Enriched/Advanced] [H = Honors]

Will this class be grade weighted: Yes\_\_\_\_\_ No\_\_\_\_

College Credit value of the class: \_\_\_\_\_

High School Credits the class will receive: \_\_\_\_\_ credits

(1 credit college course = .25 WHS Credits) student receive ¼ credit

NOTE to Guidance Counselors: Please submit completed copy of this form to K Larson, High School Guidance