

Fruitport High School
 357 N.Sixth Street
 Fruitport, MI 49415
 231-865-3101

**REQUEST FOR PERSONAL CURRICULUM FOR
 GENERAL EDUCATION STUDENTS**



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).

1. STUDENT INFORMATION – Complete all sections

Name of Student:		Grade:
Anticipated Graduation Date:	School:FHS	Birth Date:
Requested By: <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Student (18 or older) <input type="checkbox"/> 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).

Mathematics - (4 Credits) <input type="checkbox"/> Algebra I <input type="checkbox"/> Geometry <input type="checkbox"/> Algebra II <input type="checkbox"/> Math 4 th Year <i>Courses could have different titles and aligning content to these.</i>	Physical Education & Health – (1 Credit) <input type="checkbox"/> PE (.5) <input type="checkbox"/> Health (.5)	These are the only MMC requirements that can be modified for general education students
Social Science – (3 credits) <input type="checkbox"/> World History/Geography <input type="checkbox"/> US History Geography <input type="checkbox"/> Economics <input type="checkbox"/> Civics	Visual, Performing & Applied Arts – (1 Credit) <input type="checkbox"/>	

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.

<input type="checkbox"/>	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.
<input type="checkbox"/>	I understand major modifications to the MMC may not result in a Michigan diploma.
<input type="checkbox"/>	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.
<input type="checkbox"/>	I understand that the student may or may not be eligible for further consideration of a PC, even though a PC is requested.
<input type="checkbox"/>	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:



PERSONAL CURRICULUM PLAN FOR GENERAL EDUCATION STUDENTS

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.

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.
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Choose interested career pathways if applicable:

<input type="checkbox"/> Health Services	<input type="checkbox"/> Human Services	<input type="checkbox"/> Natural Resources and Agri-science
<input type="checkbox"/> Arts and Communications	<input type="checkbox"/> Business Managements, Marketing and Technology	<input type="checkbox"/> Engineering/Manufacturing and Industrial Technology

3. CREDIT MODIFICATION(S) REQUESTED – Complete all sections that apply

A. MMC MATH CREDIT MODIFICATION*

Modified Content/Course:	Justification Statement:
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B. MMC PHYSICAL EDUCATION CREDIT MODIFICATION *

Modified Content/Course:	Justification Statement:
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C. MMC SOCIAL SCIENCE EDUCATION CREDIT MODIFICATION *

Modified Content/Course:	Justification Statement:
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D. MMC VISUAL PERFORMING ARTS CREDIT MODIFICATION *

Modified Content/Course:	Justification Statement:
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4.	COMMITTEE MEMBERS' SIGNATURES – <i>Signature indicates participation in development and/or agreement with the plan</i>	
	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.

5.	PARENT/GUARDIAN/STUDENT COMMITMENT	
	<input type="checkbox"/> 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.	
	<input type="checkbox"/> 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.	
	<input type="checkbox"/> 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.	
	<input type="checkbox"/> 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	
	<input type="checkbox"/> I approve this personal curriculum plan for implementation.	
	<input type="checkbox"/> 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.