

Oak Meadow

K-12 CURRICULUM AND DISTANCE LEARNING

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Approved ☐ Denied ☐

Number of Credits Granted _____

Subject Area _____

Life Experience Credit Application

This section to be completed by the student, then given to the teacher or supervisor for their evaluation.

Student Name _____ Date of Application _____

Address _____ City _____ State _____ Zip _____

Evaluation Period Begins: _____ Evaluation Period Ends: _____

A minimum of 30 hours of work must be submitted to earn one-quarter credit. Forms with fewer than 30 hours noted will not be considered.

What is the nature of this learning situation? Please check one of the following and explain:

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Class that meets regularly with an instructor

- What is the course title and content? _____
- How many hours per week does the class meet? _____
- Total number of hours for this class this semester: _____
- Approximately how many students are in the class? _____
- Who sponsors this class? (individual, college, etc.) _____
- Did you receive a certificate of completion? If so, please attach it.

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Internship, Independent or Volunteer Work Experience

- Employer/supervisor, job title, and duties/activities: _____

- Hours per week worked in this position: _____
- Total number of hours worked this semester: _____

To the teacher or supervisor: The above-named student is applying for academic high school credit. Please assist us by completing this section and emailing it to our Registrar at registrar@oakmeadow.com. If you have any questions, please contact your Educational Counselor. Thank you.

Teacher or Supervisor's Name _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Email _____

1. What is your professional relationship to the student?

2. What are your professional qualifications for evaluating the student's participation/work?

3. On a scale of 1 to 5 (1 = poor, 5 = excellent), how would you rate the student's performance?

Explain each briefly.

| | | | | | | |
|---------------|---|---|---|---|---|-------|
| Attitude | 1 | 2 | 3 | 4 | 5 | _____ |
| Reliability | 1 | 2 | 3 | 4 | 5 | _____ |
| Initiative | 1 | 2 | 3 | 4 | 5 | _____ |
| Understanding | 1 | 2 | 3 | 4 | 5 | _____ |
| Proficiency | 1 | 2 | 3 | 4 | 5 | _____ |

4. Please briefly summarize the work that you feel qualifies this student for credit:

Signature _____ Date _____