Form B New York State Education Department Student Support Services Room 318-M, Education Building Albany, NY 12234

Application for Variance of Admission Requirements Alternative High School Equivalency Preparation Program (AHSEP) SECTION I: Agency Information

SECTION I. Agency mormation				
Name of School District Currently Enrolled In:		On day register?:		
		Yes	No	
Address: City	State		Zip Code	
Contact Person Name and E-mail address:		Telephone Number:		
Student Name (please print):	Date of Birth:	Age:	Current Grade	
			Designation:	
Name of District/BOCES/State Agency Operating AHSEP Program:		Hom	e District Compulsory Age:	
0,1,0	6			
	1 1 1 1	16	or 17	

*Student must complete the school year in which they reach the home district's compulsory age of education to be eligible for the AHSEP. A variance in not needed for students 18 or older. School year is from July 1, 2022 – June 30, 2023.

SECTION II: Please complete for student who has been enrolled in 9-12 for one year or more.

A.	Enter number of credits required for graduation	
B.	Multiply the number in "A" by 0.125	
C.	Enter the number of complete years the student has been in grades 9-12	
D.	B x C results are calculated here	
E.	Enter the total number of credits earned by the student	
F.	Subtract D from E (+, -, or 0)	

If the number on line II-F is negative or zero, the student meets AHSEP admission requirements, and no variance is required. If the number is positive, complete the rest of this form and submit it for approval.

SECTION III:

Does the student possess reading skills
of at least a 9th grade level?Does the student possess math skills
of at least a 9th grade level?A. YesNoB. YesNo

If no is selected for either A or B, students should not begin instruction that is specifically designed for the alternative testing preparation unless they can perform math and reading at a 9.0 grade level as determined by a standardized achievement test; students who are not performing at the 9.0 grade level should receive intensive remedial instruction.

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Have academic intervention services been provided? If yes, please describe.

Has the student taken any Regents Examinations and passed?

No Have options for programs leading to a local high school diploma been explained to the student and the person in parental relation?

E. Indicate below why the variance is requested. Include any extenuating circumstances that have contributed to the student's lack of academic progress and explain why this is the best educational option for the student.

**If yes, please ensure that you submit the <u>R Application</u> per the instructions given at the <u>HSE R-</u> Application Instructions page.

I hereby request a variance to the eligibility requirements for this student for admission into the AHSEP program for the reasons indicated above.

Original Signature of Superintendent or Chief Administrative Officer

No

No

C.

D.

F.

Yes

Yes

Although I agree with this request, I understand that my son or daughter may return to school at any time before he or she becomes 21 years of age to pursue a local school diploma.

Original Signature of Parental Relation

I wish to enroll in the AHSEP to prepare for completion of the GED® Test; I understand that if I am not performing math and reading at the 9.0 grade level, I will not receive instruction specifically designed for alternative testing preparation but will rather be referred to an intensive remedial instructional program.

Original Signature of Student

Approved by:	Date:
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Date

Date

Date