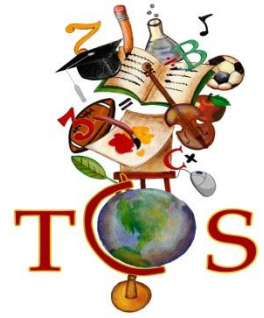


Credit by Demonstrated Mastery (CDM)
Student Record: Review Panel Recommendations



Student Name:
Student ID:
Current School:
Grade Level:
Birthdate:
Date of Application for CDM:

Phase 1 Assessment
Examination of Foundational Knowledge

Course Title or Subject Area

EOC Scale Score _____

CTE Post-assessment Score _____

NC Final Exam Score _____

Locally Created Exam _____

_____ Student met minimum 94% accuracy score for NC Final exam or Locally Created exam, 93% accuracy score for CTE post-assessment, or appropriate Level 5 scale score on EOC. Student will progress to Phase 2 of CDM process.

_____ Student did not meet minimum accuracy score. Student will not progress to Phase 2 of CDM process.

Other comments:

**Phase 2 Assessment
Artifact review**

Artifact description:

_____ Student demonstrated deep understanding of content and skills.

_____ Student did not demonstrate deep understanding of content and skills.

Other Comments:

CDM Review Panel Recommendations

Date:

___ Student has EARNED credit by demonstrated mastery (CDM) based on state and local guidelines and will receive credit for the following course:

___ Student has NOT EARNED credit by demonstrated mastery (CDM) based on state and local guidelines and will not receive credit for the following course:

CDM Review Panel Signatures:

_____	_____
_____	_____
_____	_____

Student Signature:

Date:

Parent/Guardian Signature:

Date:

Please note that once this decision is made, student/family and team will together to address the implications for scheduling and course/subject placement for the following term.

Appeals Process:

If a student or parent/guardian is in disagreement with the recommendations of the CDM Review Panel, the student or parent/guardian may appeal the decision through the following process:

Appeals and Suggested Grievance Process

1. Parent/Guardian may appeal in writing within 10 days of decision
2. Panel will review appeals within 10 days of recommendations and collect any additional data requested by the panel.
3. Final recommendations will be made within 10 days of Appeals Review.

Appeal of recommendation received (date): _____

Appeal review date _____

Appeal review comments:

Final Review Panel recommendation:

_____ CDM approved

_____ CDM not approved