

Mason County Schools

1 Education Lane
Point Pleasant WV 25550
304-675-4540

APPLICATION FOR TESTING IN LIEU OF TAKING CLASS

(Must be received by Department of Curriculum and Instruction at least 14 calendar days prior to date of test.)

Student Number: _____

Student Name: _____

School: _____

Grade: _____ Home Phone Number: _____

I request the opportunity to take a test in lieu of taking the following course:

Course: _____

Test Date: _____

I have received information on the course and understand all the requirements and deadlines related to this procedure.

Student's Signature

Parent/Guardian Signature

Principal Signature

Counselor Signature