

Special Language Credit Option:
Challenge for Credit
Request Form

Students wishing to **challenge** for special language credits must complete this form and forward it for approval to the school principal.

Part 1: Completed by the student

Name of Applicant _____

(Surname)

(Given Name)

Language _____

Grade level to be tested/challenged (check):

Languages for which department-developed or
-approved curricula are available

10G 20G 30S 40S

Languages for which department-developed or
-approved curricula **are not** available

11G 21G 31G 41G

Additional comments/information:

(Date)

(Applicant's Signature)

(Date)

(Parent/Guardian Signature [if applicant under age 18])

Part 2: Completed by the school

Name of Applicant _____

Names of examiner(s) competent to judge fluency in this language

(Name)

(Address)

(Postal Code)

(Phone)

If you wish to use an examiner not listed by Manitoba Education and Advanced Learning, please complete the Examiner's Registration Form.

Approved _____
(Date)

(Principal's/Designates's Signature)