|            | BOARD OF TRUSTEES<br>AGENDA   |
|------------|---|
|            | Workshop X Regular Special  |
| (A)        | Report Only Recognition Presenter(s):   |
|            | Briefly describe the subject of the report or recognition presentation.   |
|            |   |
|            |   |
| (B)        | X       Action Item         Presenter(s):       DAVID CAMARILLO, EXECUTIVE DIRECTOR FOR INSTRUCTION   |
| (B)        |   |
| (B)<br>(C) | Presenter(s): DAVID CAMARILLO, EXECUTIVE DIRECTOR FOR INSTRUCTION<br>Briefly describe the action required.<br>CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO PURCHASE CREDIT BY<br>EXAM TESTS FOR EPISD SECONDARY CAMPUSES FROM TEXAS TECH UNIVERSITY ISD AND<br>THE BOARD DELEGATES THE SUPERINTENDENT OR DESIGNEE THE AUTHORITY TO MAKE   |
|            | Presenter(s): DAVID CAMARILLO, EXECUTIVE DIRECTOR FOR INSTRUCTION<br>Briefly describe the action required.<br>CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO PURCHASE CREDIT BY<br>EXAM TESTS FOR EPISD SECONDARY CAMPUSES FROM TEXAS TECH UNIVERSITY ISD AND<br>THE BOARD DELEGATES THE SUPERINTENDENT OR DESIGNEE THE AUTHORITY TO MAKE<br>RELATED BUDGETED PURCHASES OF GOODS OR SERVICES AS PER BOARD POLICY. |
|            | Presenter(s): DAVID CAMARILLO, EXECUTIVE DIRECTOR FOR INSTRUCTION<br>Briefly describe the action required.<br>CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO PURCHASE CREDIT BY<br>EXAM TESTS FOR EPISD SECONDARY CAMPUSES FROM TEXAS TECH UNIVERSITY ISD AND<br>THE BOARD DELEGATES THE SUPERINTENDENT OR DESIGNEE THE AUTHORITY TO MAKE<br>RELATED BUDGETED PURCHASES OF GOODS OR SERVICES AS PER BOARD POLICY. |



EAGLE PASS INDEPENDENT SCHOOL DISTRICT

Instructional Services Department

# MEMO

| To:   | Samuel Mijares, Superintendent of Schools           |
|-------|---|
| From: | David Camarillo, Executive Director for Instruction |
| Date: | June 29, 2021                                       |
| Re:   | Credit by Exam                                      |
|       |   |

The TTU K-12 Credit by Exam is being submitted for board approval. Credit by Exams (CBEs) offer appropriate and reliable placement or credit for students in grades K-12.

Students in grades 6-12 who did not receive credit may earn credit by passing an exam 2(grade of 70% or above). Students in grades K-12 seeking placement credit may earn credit by passing these exams with a grade of 80% or above.

Should you have any questions, please do not hesitate to contact our office at ext. 82201 or ext. 82202.

DC/vs

649 WEBSTER ST • EAGLE PASS, TEXAS 78852 • (830) 752-3724 or (830) 752-3725 • FAX (830) 758-7164

# EAGLE PASS INDEPENDENT SCHOOL DISTRICT INSTRUCTIONAL SERVICES DEPARTMENT

649 WEBSTER STREET • EAGLE PASS, TEXAS 78852 • (830) 752-3725 ext-82201 FAX (830) 758-7164

Credit By Exam Board Agenda Item

## 2020-2021

| Vendor | Grade Level | Description     | Funding | Estimated Amount<br>For Fall & Spring |
|--------|-------------|-----------------|---------|---------------------------------------|
| TTUISD | Secondary   | Credit By Exams | 169     | \$60,000.00                           |
|        | Campuses    |                 |         |                                       |

| Approved by EPISD Board | of Trustees |
|-------------------------|-------------|
| day of                  | , 2019      |
| Superintendent          | t           |

# Institutional Testing Services Print-based CBE Enrollment Form

Note:

In order to submit payment through the payment gateway, you must enable cookies in your web browser. If you do not know how to do this, please visit the following link and follow the given instructions for your web browser before continuing: http://www.wikihow.com/Enable-Cookies-in-Your-Internet-Web-Browser

\* Required

#### INSTRUCTIONS

This form has been created for use by school districts and educational service centers when ordering print-based CBEs in quantity. All exams ordered on this form will be sent to the address listed below. Please see that students get review material in time to study for their exams. Use this form to indicate the total number of exams you need for each subject area and total costs. Reminder: Students may only take a CBE twice. If you are ordering for multiple campuses and would like the tests to be bundled together by campus, please use a separate Summary Form for each campus and complete the information at the top of each one.

Test Date \*

|            | • |  |
|------------|---|--|
| mm/dd/yyyy |   |  |

#### COST INFORMATION

No refunds will be granted for CBEs.

Print-based CBEs are \$25.00 each and each order is shipped using FedEx 2-day delivery with no additional cost.

#### SHIPPING INFORMATION

Information must be completed by school district official.

| School District Official  |  |                  |
|---------------------------|--|------------------|
|                           | Name *   | Title *          |
| Educational Service       |  |                  |
| Center or School District |  |                  |
| Name *                    |  |                  |
| Campus Address            | an an an an an an ann an ann an ann an a   |                  |
|                           | Street Address *   |                  |
|                           |  |                  |
|                           | Street Address Line 2  |                  |
|                           |  | ★                |
|                           | City *   | County (TX only) |
|                           | a August - Anna agusta ann ann an an Anna ann an Anna an Anna an Anna an Anna an Anna Anna Anna Anna Anna Anna |                  |
|                           |  | ·                |

https://appserv.itts.ttu.edu/TTUISDWebForms/InstitutionalTestingServicesEnrollment/Form

| 9/2021   | Institutional Testing Services Print-based   | I CBE Enrollment Form - TTU K-12 Forms   |
|--|--|--|
|  | State / Province *   | Postal / Zip Code  |
| Phone *  |  |  |
|  |  |  |
| Contact Person's Name *  |  |  |
| E-mail Address *   |  |  |
|  | L  |  |
| CONTACT INFORMATION  |  |  |
| Information must be completed by s   | school district official.  |  |
| Copy Shipping Information  | n  |  |
| School District Official   |  |  |
|  | Name *   | Title *  |
|  |  |  |
| Educational Service  |  |  |
| Center or School District<br>Name *  |  |  |
| Address  |  | I  |
|  | Street Address *   | 1  |
|  | Street Address   | 3  |
|  |  |  |
|  | Street Address Line 2  |  |
|  |  | ↓  |
|  | City *   | County (TX only)   |
|  |  |  |
|  | State / Province *   | Postal / Zip Code  |
| Phone *  |  | 1  |
|  |  | .l   |
| E-mail Address *   |  |  |
|  | - A set of the set |  |
| SUMMARY FORMS  |  |  |
|  |  |  |
| If you are an Educational Service Ce<br>ordering for multiple campuses use | enter ordering for multiple school dist<br>e one form per campus. If you don't r   | ricts, use one form per district. If you are a school district<br>need your exams sorted by districts or campuses, you may |
| use only one form.   |  |  |
| · · · · · · · · · · · · · · · · · · ·                                      |  |  |
|  |  |  |

| Sorting Options |                       |                                       |
|-----------------|-----------------------|---------------------------------------|
| Campus Name *   |                       |                                       |
| Campus Address  |                       |                                       |
|                 | Street Address *      |                                       |
|                 | Street Address Line 2 |                                       |
|                 |                       | · · · · · · · · · · · · · · · · · · · |
|                 | City *                | County (TX only)                      |
|                 |                       |                                       |
|                 |                       | Postel / 7in Code                     |
|                 | State / Province *    | Postal / Zip Code                     |

### Print-based Credit By Exams

. . . . . . . . . . . . .

|   | Name of Credit by Examination         | Number Needed                           | Cost<br>\$0.00 |
|---|---------------------------------------|---|----------------|
|   |                                       |   |                |
|   | · · · · · · · · · · · · · · · · · · · |   | \$0.00         |
|   |                                       |   | \$0.00         |
|   |                                       |   | \$0.0          |
|   |                                       |   |                |
|   |                                       |   | \$0.0          |
|   |                                       |   | \$0.0          |
|   |                                       |   | \$0.0          |
|   | · · · · · · · · · · · · · · · · · · · |   | \$0.0          |
|   |                                       |   | \$0.0          |
| 5 | · · · · · · · · · · · · · · · · · · · |   | \$0.0          |
| I |                                       | , ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] | \$ <b>0.</b> 0 |
| 2 | L <u></u>                             |   | \$0.0          |

https://appserv.itts.ttu.edu/TTUISDWebForms/InstitutionalTestingServicesEnrollment/Form

÷

Institutional Testing Services Print-based CBE Enrollment Form - TTU K-12 Forms

| 13  |   |  | \$0.00  |   |  |  |
|---|---|--|---|---|--|--|
| 14  |   |  | \$0.00  |   |  |  |
| 15  |   |  | \$0.00  |   |  |  |
|   | Add CBE   | na a seconda a constituti da narranana a constante na constante da constante da constante da constante da cons<br>Internet | a a tana ang ang ang ang ang ang ang ang ang    |   |  |  |
|   | Total \$0.00  |  |   |   |  |  |
| h <u></u>   | Summary Form  | )  |   |   |  |  |
| Texas Te<br>Box 421   | n: TTU K-12<br>ech University   |  |   |   |  |  |
| Attention<br>Drane Ha<br>Texas Te<br>2515 15  | ch University   |  |   |   |  |  |
| TTU K-1<br>ttuk12@  |   |  |   |   |  |  |
| Questions? Contact TTU K-12.<br>By clicking one of the following buttons, you are electronically authorizing this Institutional Testing Services Enrollment Form to be submitted. |   |  |   |   |  |  |
| Purcha  | Purchase Order Number   |  |   |   |  |  |
| Pay w   | vith Purchase Order   | Pay with Credit Card   | Save for Later and Print                        | ] |  |  |
|   | a de la desenvación de la compositiva de la contra de la co | а мало с сала матила на мала се с с на кака се на кого в кого в кого салова у 10 мало осторе в с — с с П. с — «М с         | N. J. C. M. |   |  |  |