Competency-Based Diploma Pilot Program Manual











Department of Education & Workforce

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Competency-Based Diploma Pilot Program

Guidance

- The Competency-Based Diploma Pilot Program is a competency-based program.
- The Competency-Based Diploma Pilot High School Diploma Program will be open to adults ages 18-21 and run for 2 years from January 10, 2024 – June 30, 2025



- Providers are required to provide career counseling to an adult participant that ensures the adult participant is aware of the options available.
- Providers shall develop an individual Credit Recovery Plan with each adult participant based on the credits and assessments the adult participant needs to pass to earn a high school diploma.
- Providers shall develop an attendance policy and document participant attendance through the attendance tab on the finance side of the participant's application.
- The district of residence where the participant currently resides shall issue a diploma and final transcript within 60 days after the district of residence receives a certificate of completion.

Competency-Based Diploma Pilot Program - Provider Eligibility

The following institutions are eligible to be providers:

- Community school dropout prevention and recovery program;
- City, local, or exempted village school district;
- Community Colleges; and
- Ohio Technical Centers.

Competency-Based Diploma Pilot Program - Participant Eligibility

Adults must meet the following criteria to participate in the Competency-Based Diploma Pilot Program:

- Be between the ages of 18-21
- Have not received a valid high school diploma or equivalent; and
- Be an Ohio resident.

OEDS Roles

Employees of public schools who are authorized to access the Competency-Based Diploma Program must have the following roles:

- HSD Nominator Completes the application
- Superintendent or Superintendent Designee Submits the application

The school's OEDS administrator assigns these roles.

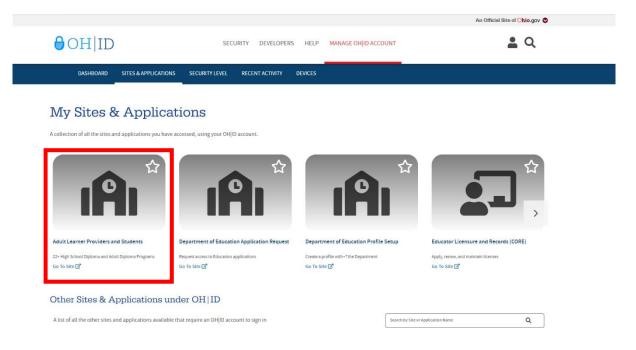
Provider Application

1. Sign-in to your OH|ID Account via the login page.



	An Official Site of Ohio.gov 🛇
⊖OH ID	
Log in to your OH ID account to access multiple state applications.	
User ID	
FORGOT YOUR USER ID? Password	
FORGOT PASSWORD?	
Log In	
LOGIN HELP FIRST TIME USER?	
By logging in to and using this website, I agree to the Terms of Use and Legal Terms and Conditions of this website and to any other terms and conditions that may be set forth on th computer systems may be accessed and used only for official state business by authorized personnel.	e individual pages of this website. State of Ohio

You should be taken to a page of your applications. They now appear as tiles:



If you do NOT have the Adult Learner tile, begin with step 2. Otherwise, proceed to step 3.



2. Request Access to Adult

- a) Your OEDS Administrator must assign the HSD Nominator role.
- b) Click the following tile:



- c) Application Request
 - 1) Enter information in the four text boxes: Name, Email, Phone and Extension
 - 2) Application: Select Adult Learner
 - *3)* Membership Requested: Select *HSD Provider Applicant.* Providers **never** select Adult Learner for the Membership Requested.
 - 4) Reason: Include your school name, job title, and the reason for requesting access to the Adult Learner Provider Application, such as Adult 22+
 - 5) Once entered, click Submit.

SAFE Applic	ation Request		
or a L reppire			
CONTACT INF	FORMATION *Change contact informa	tion if needed for request purposes only*	
Name:		*Email:	
Phone:		Extension:	
REQUEST INF	FORMATION		
*Application:	Adult Learner	*Membership Requested:	HSD Provider Applicant
	In the reason box below, please indica whether you are a student or a provide you are a provider, indicate your job titl and institution.	r. If	
*Reason:			
*Required			Submit

BEGIN HERE (Step 3) if you already have access to the Adult Participant Web

3. Access the Adult Learner Web System





Once access is granted to the Competency-Based Diploma Pilot Program Application, eligible organizations may

apply by clicking on the Adult Learner web system.

My Apps

You are currently subscribed to the apps below - clicking the "X" on the app tile will unsubscribe you from the app and reinstating your subscription may require addii Adult Learner CTE-26 Department of **Providers and Students** Submit career-tech **Education Profile Role** workforce development 22+ High School Diploma Coordinator and Adult Diploma plans Approve application Programs requests Educator Licensure and Human Resources Learning Management Records (CORE) Management System System (LMS) Apply, renew, and maintain (HRMS) Online training tool licenses Timecard entry and leave requests 4. To Begin a Provider Application

a) On the top left side of the screen, click *Select Program*. If given a choice, select *Competency-Based Diploma Pilot Program*. The *Provider Search Page* should appear.



b) **NEW Providers:** Select New Provider Application under the Provider Tab.

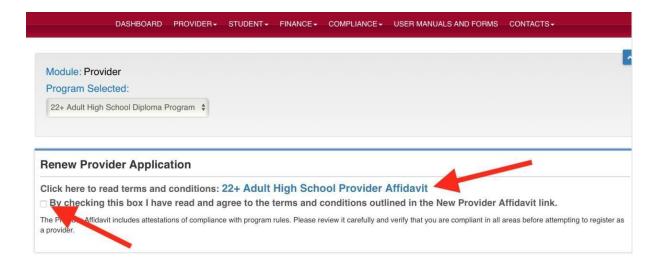
DASHBOARD	PROVIDER -	STUDENT -	FINANCE -	COMPLIANCE -	USER MANUALS AND FORMS	со
	» Search Pro	vider				
Module: Provider	» New Provid	er Application				
Program Selected:	» Renew Pro	vider Application				
22+ Adult High School Diploma Program	» Task Mana	gement				

c) **CURRENT Providers:** Select *Renew Provider Application under the Provider Tab.*



Ohio Departme	nt on			KELSEY LEW		+J LOGOU	Session 1
DASHBOARD	PROVIDER-	STUDENT - FINA	NCE -	COMPLIANCE -	USER MANUALS A	ND FORMS	CONTACTS -
Madala Devider	» Search F» New Pro	Provider	-				
Module: Provider Program Selected:		Provider Application	4				
22+ Adult High School Diploma F	» Task Mar	nagement					

d) Click to read the terms and conditions of the *Adult Provider Affidavit*. Please review carefully and verify that you are compliant in all areas. Check the box to confirm that you read and agree to the terms and conditions.



e) New providers select the correct organization and click START APPLICATION, which expands the box. Complete the TaxId box and confirm the Application Period is set to *Adult Participant FY 2025,* then click *Submit.*



lick here to read terms and conditions: 22+ Adult High School	Provider Affidavit
By checking this box I have read and agree to the terms and con-	
 All Service Providers are listed in The Ohio Educational Directory System (OED organization in the dropdown list below. Select your organization and click on STA 2. If you are a school or past provider and your organization does not appear in th 3. If your organization is new and is not currently listed in OEDS, begin by selecting the second se	aview it carefully and verify that you are compliant in all areas before attempting to register as a provider. S). If your organization is already listed in OEDS and you have the proper associated role you will see your IRT APPLICATION. After your data appears, click SUBMIT. e dropdown please check with your OEDS administrator to assure you have the correct role. Ig Create a New Org/Provider from the drop down list and click on START APPLICATION. Then, fill out the general formation Retrieval Number - which is used as a unique identifier for your organization) upon application approval.
art application by: Selecting an Organization you are associated with from the drop	down or select "Create a New Org/Provider" then press Start Application.
ssociated Orgs: 007830 - ACADEMIA VOCATIONAL DEL TURABO	
Socialed Sign. Utrade - ACADEMIA VOCATIONAE DEE TOTADO V	
Start Application	
Start Application	
Start Application	
Start Application	
	Taxid:
rganization Information	
rganization Information	Designate ocenty: Out of State
rganization Information Name: ACADEMIA VOCATIONAL DEL TURABO	Designate oceanty: Out of State Fax: N/A
rganization Information Name: ACADEMIA VOCATIONAL DEL TURABO Im: 007830 Phone: (787) 746 - 6634 Email: N/A	Designate ocenty: Out of State
rganization Information Name: ACADEMIA VOCATIONAL DEL TURABO Im: 007830 Phone: (787) 746 - 6634 Email: N/A Application Period:	Designate ocenny: Out of State Fax: N/A
rganization Information Name: ACADEMIA VOCATIONAL DEL TURABO Im: 007830 Phone: (787) 746 - 6634 Email: N/A	Designate ocenny: Out of State Fax: N/A
rganization Information Name: ACADEMIA VOCATIONAL DEL TURABO Im: 007830 Phone: (787) 746 - 6634 Email: N/A	Designate county: Out of State Fax: N/A

f) Providers renewing their applications will click START RENEWAL, which expands the box Confirm the Application Period is set to the appropriate fiscal year. Click *Renew Application*.

in the second seco	ol Provider Affidavit
By checking this box I have read and agree to the terms and co	
 All Service Providers are listed in The Ohio Educational Directory System (O organization in the dropdown list below. Select your organization and click on S If you are a school or past provider and your organization does not appear in If your organization is new and is not currently listed in OEDS, begin by select 	e review it carefully and verify that you are compliant in all areas before attempting to register as a provider. DEDS). If your organization is already listed in OEDS and you have the proper associated role you will see your START APPLICATION. After your data appears, click SUBMIT. It he dropdown please check with your OEDS administrator to assure you have the correct role. cting Create a New Org / Provider from the drop down list and click on START APPLICATION. Then, fill out the I an IRN (Information Retrieval Number - which is used as a unique identifier for your organization) upon applicati
elected Organization: 046326 - Clermont Northeastern Local	
	Start renewal
Organization Information	
Name: Clermont Northeastern Local	TaxId: 316005529
	Designate County: Clermont
Irn: 046326	
Irn: 046326 Phone: (513) 625 - 5478	Fax: (513) 625 - 6080
Phone: (513) 625 - 5478	Fax: (513) 625 - 6080

6. General Information Tab



a) Ensure all information is correct. Only the school's OEDS Administrator can make changes to the information on this tab.

eneral	Personnel	Programs/Courses	Docs	Status / Flags	Comments / History	
--------	-----------	------------------	------	----------------	--------------------	--

b) Go to the box titled *Provider/Program Status Info* on the bottom right. Confirm the Application Type is accurate. If needed, click the *Edit* icon and choose *First Year Applications* or *Renewal Applications* from the drop-down menu then click the save icon.

Provider/Pr	ogram Status Info	•
Servicing: Adul	t Diploma Program	
Current Status:	Started	
Application Typ	e: Renewal Application	ns 🕜
Application Per	od: Adult Diploma FY	1

7. Personnel Tab

Click on ADD or REMOVE to modify the staff members who have access to the Program.

General Personnel	Application Participating Buildings	Docs Status	s / Flags Comments / History
Personnel	Details		
LEWIS, KELSEY	Name: KELSEY J LEWIS Phone: (513) 62: -1211 Email: Refresh@fakemail.com	Do SSN (Last +): 6394
Add Remove	Available Roles	Add Role 🕥 📀 Remove Role	Assigned Roles HSD Nominator

8. Application Tab



Providers renewing applications are required to provide updates response for each of the eight questions.

NOTE: This tab may take longer to load. Please be patient.

Sections		 Questions
Graduation rate		Question : Graduation rate Question Count : 1
	0/1	» Question
rocess for assessing competency and ne awarding of prior credit	0/1	Specify the educational institution's 4, 5, 6, 7 and 8 (if applicable) year graduation rate from the previous year Local Report Card.
	0/1	Local Report Gard.
areer-technical training offering details	0/1	** 2,000 character maximum response for each question.
	0/1	Enter text here
	0/1	
Program differences between adult earners and K-12 grade students	0/1	
Export to PDF		
		· · · · · · · · · · · · · · · · · · ·

9. Participating Buildings

Include information on each of the buildings which will provide learning opportunities for adult participants through the Competency-Based Diploma Pilot Program.

General	Personnel Application	Participating Buildings	Docs	Status / Flags	Comments / History	
Buildings						
IRN	PHYSICAL ADDRESS	ACCEPTING	APPROVED	WITHDRAWN	TERMINATED	
006635	5327 Hutchinson Rd Batavia, Ohio 45103-9511					
					Sa	ave

10. Docs Tab

Upload the required documents listed:

- Local Report Card Graduate Rate (Community Colleges will upload a document stating no report is available. All other providers upload the most recent report card.)
- Handbook (All providers)
- W-9 Form, if applicable (All Schools)
- Letter on Sponsor's letterhead acknowledging you are applying for the Competency-Based Diploma Pilot Program, ifapplicable (Community Schools only)
- 11. Status/Flags Tab





The FY25 Provider Application is submitted once all eight questions are answered and all documents are uploaded.

NOTE: Only the school's superintendent or superintendent designee for K-12 schools or HSD Authorizer for colleges can submit the FY25 Provider Application. HSD Nominator's are *not* permitted to submit the application.

The picture below is taken from an HSD Nominator's login; therefore, there is no ability to submit.

Applied flags yo	ou may remove			Sta	tus
Applied flags yo	ou may remove				
					rent Application Status
Applied flags you	may not remove			Upda	ate Status To:

12. Participant Content, Electives and Assessment Info

Comments can be made by the HSD Authorizer, HSD Nominator, superintendent, superintendent designee and/or the Ohio Department of Education Program Administrator. Notices are **not** provided to the authorizer, nominator, superintendent or designee and/or the department administrator when a comment is made. **The function of the comment box is for historical notes only.**

Please email any necessary comments directly to the appropriate person.

13. Annual Renewal of the Provider Application Approved Providers are required to renew their application annually. Funding for an application period ends June 30 of the fiscal year.

IMPORTANT INFORMATION



1. The adult participant MUST have a OH|ID account* BEFORE you can begin a Student Application.

*This means the adult participant must create AND confirm the OH|ID account via email.

- 2. It is important that ALL participant records have been reviewed prior to completing the participant application.
 - a. Prior transcript(s)
 - b. Work credit form (This is to be utilized first before assigning elective credits.)
 - c. Individualized Education Plan, if applicable
 - d. Assessment scores, if applicable
- 3. Participant applications must be approved by our state office prior to the participant completing coursework. Credits earned prior to an approved application are not eligible for reimbursement.

New Student Application

1.0 Completing the Student Application

Completing the Student Application is the Provider's responsibility. Providers may enroll participants into the system once the Ohio Department of Education approves the provider to offer the Competency-Based Diploma Pilot Program and the participant application window is open. The adult participant **MUST** create and confirm their SAFE account **BEFORE** beginning this process.

1.1 Sign in to OH|ID Portal. (https://safe.ode.state.oh.us/portal/)





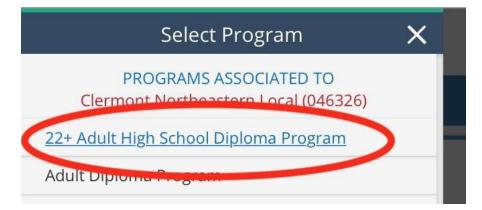
	An Official Site of Ohio.gov 🛇
⊖OH ID	
Log in to your OHID account to access multiple state applications.	
User ID	
FORGOT YOUR USER ID?	
Password	
FORGOT PASSWORD?	
🖴 Log In	
LOGIN HELP FIRST TIME USER?	
By logging in to and using this website, I agree to the Terms of Use and Legal Terms and Conditions of this website and to any other terms and conditions that may be set to computer systems may be accessed and used only for official state business by authorized personnel.	rth on the individual pages of this website. State of Ohio

1.2 Click the Adult Learner Application tile

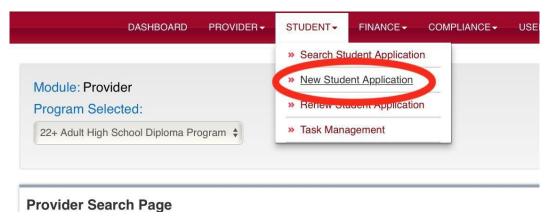
				An Official Site of	Ohio.gov 🛇
	⊖OH ID	SECURITY DEVELOPERS	HELP MANAGE OH ID ACCOUNT	<u>•</u>	Q
	DASHBOARD SITES & APPLICATION	NS SECURITY LEVEL RECENT ACTIVITY	DEVICES		
	My Sites & Applica	ations			
	A collection of all the sites and applications you hav	e accessed, using your OH ID account.			
	ÎAI [☆]	ÎAI [☆]	A		☆ >
	Adult Learner Providers and Students	Department of Education Application Request	Department of Education Profile Setup	Educator Licensure and Records (C	DRE)
	22+ High School Diploma and Adult Diploma Programs Go To Site 🗹	Request access to Education applications Go To Site 🗗	Create a profile with-†the Department Go To Site 🗗	Apply, renew, and maintain licenses Go To Site 🗗	
	Other Sites & Applications u	nder OH ID			
3 The Da	A list of all the other sites and applications availab	le that require an OH ID account to sign in	Search b	y Site or Application Name	٩
01.	Department	Welcom	e : KELSEY LEWIS	-) LC	Session Timeout:
Ohio	Department of Education	046326 - Clerr	mont Northeastern Local		
E Select Pro	gram	Adult	Dashboard		1
	ANNOUNCEMEN	TS	0	TASKS IN OPEN S	STATUS
			MY OP	0 EN TASKS	GROUP TASKS



1.4 In the window that appears on the left, click on 22+ Adult High School Diploma Program.



1.5 Hover over the Student Tab located in the top left of the page. Select New Student Application.



2.0 Student Search for Creating a New Application

2.1 Select the appropriate Application Period. Add new participant information in the three required fields: *Student Date of Birth, Student First Name*, and *Student Last Name*.



Student Search for	Creating a New Application	
Application Period		
Adult Learner FY		v
*Student Date of Birth		
01/01/1990		
Student First Name		
camden		
Current Last Name is di	fferent than birth certificate	
Student Last Name		
stephens		
SSID		
QSearch Reset		

2.2 Once all required participant data are entered, click Search.

Student Search for Creating a New Application

Application Period	Adult Learner FY		
*Stulent Date of Birth:	01/01/199C (mm/dd/yyyy)	SSID:	
*Stulent First name:	Wayne	*Student Last name:	Gretzky
*Required Fields		Current last name	is different than birth certificate
Search Reset			

2.3 The message "Your search parameters return ZERO results" should appear. Click the HERE located on the bottom left to create a new application.

		Student Se	arch for Creating a N	New Application	1		
Application Period	Adult Learner FY						
*Student Date of Birth:	01/01/199C (mm/dd/yyyy)	SSID:					
*Student First name:	Wayne	*Student Last name:	Gretzky				
		Current last name	is different than birth certificate				
*Required Fields Search Reset		-					
Your search parameter	s return ZERO results. 🚄						
If a contract of the second and an Criating a dup cate str Click <u>HERE</u> to dd a Ne	application in the past an udent will delay the applic ew Student to the system	d you do not find them ation approval process	in your search, contact th	e program office for	assistance before cr	eating a new student.	

3.0 Entering Basic Student Information

3.1 Nine critical data points **must** be correct: First Name, Middle Name, Last Name, Gender, Date of Birth, Birth Place city, Ethnicity, Language, and Mother's Maiden Name. The participant information entered on this page must match the participant's information entered in the participant's SAFE account!! These items ensure correct participant data are established, maintained, and available for future tracking and transfer.



*Note – make sure the correct Application Period is selected from the dropdown box.

Depending on Student age, 1 of 3 scenarios will occur. **Case 1:** If the student age is 22 or older

	SELE	CT ~	-		
Student Home Mail	ina Addre	ess			
	5				
Home Mailing Address s	ame as Home	Physical Address			
Address Line1	Address	Line2			
City	*State	*Zi	p		
	SELE		·		
Application Inform	ation				
Application Period		*County		*Legal District of Residence	
Adult Learner FY 2024	~	SELECT	~	SELECT	~
				The field is required.	
Residency Begin Date		*Initial Provider		*Assigned Building	
07/01/2023		SELECT	~	SELECT	~
Program Criteria					
Student does not have a	High School [Diploma or Certificate of Hig	h School Equival	ence	
Please certifies the followir	na(s)				
Student is 22 years of ag		23 years. This application	will be enrolled i	n the HSD (22+) program.	
Student is 22 years of ag	e as of 1/5/2024				
	e as of 1/5/2024	Lo Jouro, rino apprioution			



Student Home	Mailing Addr	ess			
Home Mailing Add	dress same as Home	Physical Address			
*Address Line1	Address	Line2			
*City	*State	*Zi	þ		
	OF LE				
	SELE	CT V	-		
Application Inf		CT Y			
Application Inf		*County		*Legal District of Residence	
	formation			*Legal District of Residence	~
*Application Period	formation	*County	ł []		~

Case 3: If the student is below 18 years of age

*City	*State	*Zip			
	SELE	CT ~			
Student Home Mail	ing Addre	ess			
Home Mailing Address sa	ıme as Home	Physical Address			
Address Line1	Address	Line2			
City	*State	*Zip			
	SELE	ст 🗸			
Application Period		*County		*Legal District of Residence	
Adult Learner FY 2024	~	SELECT	~	SELECT	~
Adult Learner FY 2024 Residency Begin Date	~	*Initial Provider		*Assigned Building	
Adult Learner FY 2024	~		~		~
Adult Learner FY 2024 Residency Begin Date 07/01/2023 Program Criteria Student does not have a	High School [g(s)	*Initial Provider	~	*Assigned Building	
Adult Learner FY 2024 *Residency Begin Date 07/01/2023 *Program Criteria Student does not have a *Please certifies the followin Student is 22 years of age	High School (g(s) e or older	*Initial Provider	School Equival	*Assigned Building	

Once Basic Student Information is entered, click Create New Student Application.



3.2 After clicking the *Create New Student Application* button as shown above, access will be available to the other tabs within the application.

						ID: 950332	Name: justin laut	per Period: Adult Learner FY 20	22 Type: New	Status: Started		Back to student search results
Student	Application	Past Credits Earned	Credit Recovery Plan	Assessment	Docs	Assurances	Status / Flags	Comments / History				
Studer	nt Information	G									SSID STATUS	
Ethnicity Birth Pla Phone N	sinh: 01/01/1990 : Asian or Pacific ce City: columbus umber: 333-333-3		Middle Name: Mother's Maiden Last Na Native Language: Englis Birth Place State: Ohio Phone Number Type: Ce	h			Last Name: lau Gender: Femal Last 4 Digits of SSID: Email: mallikaJ	e			Current SID Status Pending SSID Verification Lyotate SSID Status for No Action Available	
Addres		1 A datasan 🔽				Student Here						
	t Home Physica	_				Address Line1:	e Mailing Addre	55 0				
Address		а.				Address Line1. Address Line2:						
City: col						City: columbus						
State: OI						State: Ohio						
Zip: 3424	12					Zip: 34242						

4.0 Application Tab

The Application Tab includes a summary of the data entered in step 3 for the adult participant.

Student Application Past Credits Earned Cr	edit Recovery Plan	Assessment	Docs	Assurances	Status / Flags	Comments / History				
Application Information				^	HSE REVIEW					
Initial Provider: 047373, Oak Hills Local ^B Program Criteria: Student does not have a High School D Is student twenty two years of age or older? Yes)iploma or Certificate of	High School Ed	quivalence		Student does r	not have HSE rerified by HSE office				
Legal District of Residency				•	List of Provide	ers				
Legal District of Residency	RESIDENCY BEGIN DATE	RESIDENCY END DATE	DID NOT RESIDE IN THE	EDIT	List of Provide	P rs NAME	ENROLLMENT START DATE	ENROLLMENT END DATE	EDIT	DELETE

5.0 Past Credits Earned Tab

5.1 To establish the credit recovery plan for the adult participant, the provider is required to enter historic school information on the participant. Click *Enter Passed Graduation Details*.

Student Application Past Credits Earned	Credit Recovery Plan Assessment	Docs Assurances Status / Fla	gs Comments / History	
Enter Passed Graduation Details				Current Status
				Status: STARTED
	Ohio Department of Education 877-644-6338 Sign-up for Alerts Scottantic Contact.center@education.ohio.gov	Dr. Stephanie K. Siddens Interim Superintendent of Public Instructio	State Board of Education of Ohio Charlotte McGuire, President	





of Education	Enter School History	×	LOGOUT Session Timeout:00::
		S CONTACTS+	
	Year student first entered 9th grade *		
	2010		
Module: Student	Highest grade completed *		
Program Selected: 22+ Adult High School Diploma Program V	11th Grade 🗸		
	Last academic year completed *		
	2010		
ID: 921089	Name of last school attended *	Status: Started	
	test		
	Last school address *		
Student Application Past Credits Earned Credit Recovery Plan	test	ory	
Enter Passed Graduation Details		Current	Status
	* Required Fields		
		Status: S	TARTED
	© Cancel		
	◎ Cancel		
Ohio Department		of Education of Ohio	

Once the participant's historic school information is entered, click *Save*. It is important that the data are entered accurately, especially the *Year participant entered* 9th grade.

5.2 A window appears as a reminder that the data cannot be changed. Click Yes if the entries are accurate.

Onio of Education	Please Confirm	× LOGOUT Se
DASHBOARD	Once the information is saved, you will not be able to change or update it. Please check the accuracy of the information that has been provided before you click "Yes"	S CONTACTS+
Module: Student	Yes	No
Program Selected: 22+ Adult High School Diploma Program V	11th Grade	
	Last academic year completed *	
	2010	
ID: 921089	Name of last school attended *	Status: Started
	test	
	Last school address *	
Student Application Past Credits Earned Credit Recovery Plan	test	ory
S Enter Passed Graduation Details		/ Current Status
-	* Required Fields	
		Status: STARTED
	◎ Cancel	SAVE
Ohio Department		rd of Education of Ohio
877-644-6338 Sign-	p for Alerts provide the superintendent of Public Instruction Charlotte M	
contact.center@edu	ation.ohio.gov	

5.3 This page documents the courses and assessments the participant is required to take and pass to earn a high school diploma.

Past Credits Earned Tab - Entering course and assessment information This section applies to new participant applications.

The HSD Nominator uses the participant's transcript(s) to document the courses and assessment the participant passed in high school by selecting the number of completed credits in the drop-down box to the right of each Content and Elective subject. The drop-down menu includes the maximum number of credits the participant



needs to pass to meet graduation requirements the year the participant entered the 9th grade for the first time.

Beginning in July of 2022, students who entered 9th grade for the first time between 1990 and 2013 and were required to take the proficiency or Ohio Graduation Test will instead be required to take the end-of-course assessments. Students do not need to take the end-of-course assessments in place of any Ohio Graduation Tests they have already passed. For example, if a participant passed the Math Ohio Graduation Test, they do not need to take a math end-of-course assessment.

Participants with Disabilities

The HSD Nominator may check any end-of-course assessment as **passed** if the adult participant has an Individualized Education Plan that states they are exempt from the consequences of not passing one or more end-of-course assessments.

Science End-of-Course Assessment

The HSD Nominator may mark the Science end-of-course assessment as passed if the adult participant initially entered the 9th grade prior to 1997. Adult participants entering the 9th grade in 1997 and beyond are required to pass the Science end-of-course assessment.

Work/Life Credit

The HSD Nominator enters the number of Work/Life Credits under CTE elective credits on the Past Credits Earned Tab. Supporting documentation must be uploaded. Every 120 hours of work documented equals one (1) CTE credit up to the number of electives required.

Enter only data that can be verified.

udent Past Details udent finit entered 9th grade year: 2010 st academic year completed: 2010	Highest grade Name of the I					Current Status Status: STARTED	
ontent Subjects:			Elective Subjects:			Assessment Passage:	
LECTS	CREDITS		SUBJECTS	CREDITS		EOC	
glish Language Arts	3.5	*	Foreign Language	0.0	~	Assessment Passage:	
thematics	3.5	~	Fine Arts	0.0	~	ASSESSMENT English Language and Arts	POINTS
Algebra 2	1.0	~	Business	0.0	~	English Language and Arts 1	3.0
Other Mathematics	2.5	~	Career Technical	0.0	~	English Language and Arts 2	0.0
cial Studies	3.0	~	Family and Consumer Sciences	4.0	~	Mathematics	
American History	0.5	~	Technology	0.0	~	Algebra 1	3.0
American Government	0.5	~	Agricultural Education	0.0	~	Geometry	3.0
Other Social Studies	2.0	~	Junior Reserve Officer Training Corps (JROTC) program	0.0	~	Social Studies and Science	
ience	2.5	~				American History	4.0
Physical Science	1.0	~				American Government	1.0
Life Sciences	0.8	~				Biology	0.0
Advanced Study	1.0	~				Total Required Points	
atth	0.5	~					
ysical Education	0.50	~					
Physical Education Waiver							
e Arts (Semesters)	2.0	~					
onomics and Financial Literacy	2						

The following screen will appear under the Past Credits Earned tab.

Clicking Save Passed Credits/Assessment allows the HSD Nominator to double check and edit the information.



SUBJECTS	CREDITS	SUBJECTS	000000	OGT	~
English Language Arts	4.0 ~	Foreign Lang Passed credits data has been saved successfully,	×	Assessment Passage:	
Mathematics	4.0 ~	Passed credits data has been saved successfully. Fine Arts		v SUBJECTS	TESTTYPE
Algebra 2	1.0	Business	Close	Mathematics	OGT 🗸
Other Mathematics	3.0 ~	Career Technical	0.0	■ Reading	OGT 🗸
Social Studies		Family and Consumer Sciences		□ Science	OGT 🗸
American History		Technology		Social Studies	OGT 🗸
				2 Writing	OGT 🗸
American Government		Agricultural Education		** Only check the box if the student has pa	assed the assessment
Other Social Studies		Junior Reserve Officer Training Corps (JROTC) program	0.0	×	
Science	3.0 ~				
Physical Science					
Physical Science	1.0 ~				
Life Sciences					
Life Sciences Advanced Study	1.0 ×				
Life Sciences	1.0 ~				
Life Sciences Advanced Study Health	10 V 10 V 05 V				
Life Sciences Advanced Study Health Physical Education	10 V 10 V 05 V				

Clicking *Finalize Passed Credits/Assessment* locks the information on the page. Once the HSD Nominator has confirmed they have correctly uploaded all credits and assessments, click *yes*.

English Language Arts Mathematics	40		Please Confirm Foreign Lan Once you finalize the passed creditissessment data, you will not be able to change	×	~	Assessment Passage:		
Mathematics	4.0							
		~	Fine Arts data. Please check the accuracy of the data before clicking 'Yes'.	e or unide the	~	SUBJECTS	TEST TYPE	
Algebra 2	1.0	~	Business	Yes No	~	🖬 Mathematics	OGT	
Other Mathematics	3.0	~	Career Technical		~	🛱 Reading	OGT	
Social Studies	2.5	~	Family and Consumer Sciences	0.0	~	Science	OGT	
American History	0.5	~	Technology	0.0	~	Social Studies	OGT	
American Government	0.0	~	Agricultural Education	0.0	~	# Writing	OGT	
Other Social Studies	2.0	~	Junior Reserve Officer Training Corps (JROTC) program	0.0	~	** Only check the box if the student has passed the assessment	ent	
Science	3.0	~						
Physical Science	1.0	~						
Life Sciences	1.0	~						
Advanced Study	1.0	~						
Health	0.5	~						
Physical Education	0.50	~						
Physical Education Waiver								
Fine Arts (Semesters)	2.0	~						
Economics and Financial Literacy	2							



Student A	Application	Past Credits Earned	Credit Recovery	lan Assessment	Docs	Assurances	Status / Flags	Comments / History						
Student P	ast Details										Current Status			
Student first e Last academi					de completer e last school	1:11 attended:test					Status: FINALIZED			
ONTENT SUBJECT	TS		REQUIRED	PASSED	ELECTIVE SUB.	JECTS		REQUIRED	PASSED	EOC ASSESSMENT	POINTS COMPLETED	Summary	,	
inglish Langua	age Arts		4	3.5				5.0	4.0	English Language and Arts			Required	Pass
lathematics			4	3.5	Foreign Lan	guage			0	English Language and Arts 1	3	Content	15.0	13.
Algebra 2			1	1	Fine Arts				0	English Language and Arts 2	0	Elective	5.0	4.0
Other Math	hematics		3	2.5	Business				0	Mathematics		Total:	20.0	17.
iocial Studies			3	3.0	Career Tech	inical			0	Algebra 1			20.0	
American H	History		0.5	0.5	Family and	Consumer Scien	ces		4	Geometry	3			
American (Government		0.5	0.5	Technology				0		3			
Other Soci	ial Studies		2	2	Agricultural	Education			0	Social Studies and Science				
icience			3	2.5	Junior Rese	rve Officer Traini	ng Corps (JROTC)	program	0	American History	4			
	cience		1							American Government	1			

Providers can make corrections to the participants application until The Department has placed the application into the "Under Review" status.

6.0 Credit Recovery Plan Tab

6.1 When the HSD Nominator finalizes the Past Credits Earned, the system creates the Credit Recovery Plan based on the content, elective courses and assessments the adult participant is required to pass to earn a high school diploma.

If the Ohio Graduation Test is being used for assessments, the HSD Nominator will be directed to the following screen.

			ID: 950332 Name: justin lauber	r Period: Adult	Learner FY 202	2 Type: New Status: Started			Back to student search i
dent Application Past Credits Earned	Credit Recovery P	Plan Assess	nent Docs Assurances Status / Flags	Comments / Hist	tory				
fear One									
INTENT SUBJECTS	PLANNED	PASSED	ELECTIVE SUBJECTS	PLANNED	PASSED	ASSESMENT SUBJECTS	Current Status		
ocial Studies			Foreign Language	0.0 🗸	0	Science Science	Status: STARTED		
American Government	0.5 🗸	0	Fine Arts	0.0 🗸	0	Social Studies			
			Business	1.0 ~	0		Graduating Info		
			Career Technical	0.0 🗸	0		🗌 I plan on graduati	ng this year.	
			Family and Consumer Sciences	0.0 ~	0		Summary		
			Technology	0.0 🗸	0			TION 1 TRACK SELECT	ΈD
			Agricultural Education	0.0 🗸	0			Planned	Passed
			Junior Reserve Officer Training Corps (JROTC)	0.0 🗸	0		Content:	0.5	0
			program	0.0 0	U	*	Electives:	1.0	0
							Assessments:	2	0
							Totals:	3.5	0
							Award Amount:		\$ 1850.00
							Total Paid So Far:		SI

If end of course assessments are being used for assessments, the HSD Nominator will be directed to the



following screen.

Year One											
ONTENT SUBJECTS	PLANNED	PASSED	ELECTIVE SUBJEC	тв		PLANNED	PASSED	ASSESMENT SUBJECTS	Current Status		
English Language Arts	0.0 🗸	0.0	Foreign Langu	iage		0.0 🗸	0.0	English Language and Arts	Status: STARTED		
Aathematics			Fine Arts			0.0 🗸	0.0	Social Studies and Science	Guida. STRATED		
Other Mathematics	0.0 🗸	0.0	Business			0.0 👻	0.0	Total Required Points	Graduating Info		
icience			Career Techni	cal		0.0 ¥	0.0		🗆 I plan on graduati	ng this year.	
Life Sciences	0.0 🗸	0.0	Family and Co	nsumer Science	s	0.0 ~	0.0				
			Technology			0.0 ~	0.0		Summary	PTION 1 TRACK SELECT	TED.
			Agricultural Ed	lucation		0.0 ~	0.0			Planned	Passed
				e Officer Training	Corps (JROTC)	0.0 🗸	0.0		Content:	0.0	0.0
			program			0.0 +		•	Electives:	0.0	0.0
									Assessments:	0	0
									Totals:	0.0	0.0
									Award Amount:		\$ 0.00
									Total Paid So Far:		

6.2 The HSD Nominator meets with the adult participant to determine which courses the adult participant complete this year. In this example, the adult participant chooses to take 1.50 content and elective credits and two assessments this year. If the participant plans to successfully complete all requirements this year, the HSD Nominator will check the box *I plan on graduating this year*.

udent	Application	Past Credits Earned	Credit Recovery P	lan A	Assessment	Docs	Assurances	Status / Flags	Comments / Histo	ry -				
Year One														
NTENT SU	UBJECTS		PLANNED	PASSE	ED ELEC	TIVE SUBJEC	TS		PLANNED	PASSED	ASSESMENT SUBJECTS	Current Status		
cial Stu	udies				For	eign Langu	age		0.0 🗸	0	2 Science	Status: STARTER		
Americ	an Government		0.5 🗸		0 Fin	e Arts			0.0 👻	0	Social Studies	- 3702		
					Bus	iness			1.0 ~	0		Graduating Info		
					Car	eer Technik	al		0.0 ~	0		I plan on graduati	ing this year.	
							nsumer Science	15	0.0 ~	0				
						hnology			0.0 ~	0		Summary		
						-				v		0	PTION 1 TRACK SELECT	ED
					Agr	icultural Ed	ucation		0.0 🗸	0			Planned	Passed
						ior Reserve gram	e Officer Training	g Corps (JROTC)	0.0 ¥	0		Content:	0.5	0
					pro	gram					*	Electives:	1.0	0
												Assessments:	2	0
												Totals:	3.5	0
												Award Amount:		\$ 1850.00
												Total Paid So Far:		s

Clicking *Save* allows the HSD Nominator to double check and edit the information. You will see a pop-up window stating, "*Please wait*" but there is no pop-up window to state that the information was saved. The amount of funding for the adult participant is located at the bottom right of the window.



After verifying the information on the Credit Recovery Plan is accurate, click *Finalize Plan*. If the information is accurate, click *Yes*. If corrections need made, click *No*.

Department or Education			Welcon	ne : Charmayne Benkovsk	У		SAFE HOME	ABOUT ODE STATE AGENCIES	
ar Education			Please Con	nfirm		×		0	LOGOUT Session Timeou
			DAGHBOARD F Cnoe you final check the accu	ite the credit recovery plan, you will racy of the data before clicking "Yes"	not be able to change or	updete 1. Please	_	_	
odule: Student ogram Selected. 22+ Adut High School Diploma Program V									
			ID: 950332 Name: justin	a lauber Period: Adult L	eamer FY 2022	Type: New Status: Started			Back to student searc
Ident Application Past Credits Earned Cred	it Recovery Plan	Assessment	tocs Assurances Status / Flags Comments	/ History					
Year One									
						ASSESSMENT SUBJECTS	Current Status		
ocial Studies			Foreign Language	0.0 🗸	0	E Science	Status: STARTED		
American Government	0.5 🗸	0	Fine Arts	0.0 🗸	0	Ø Social Studies			
			Business	1.0 🗸	0		Graduating Info		
			Career Technical	0.0 ¥	0		I plan on graduating	a this year.	
			Family and Consumer Sciences	0.0 🗸	0		Summary		
			Technology	0.0 🗸	0			OPTION 1 TRACK SELECTER)
			Agricultural Education	0.0 🗸	0			Planned	Passed
			Junior Reserve Officer Training Corps (JROTC) prog	ram 0.0 🗸	0		Content:	0.5	0
							Electives:	1.0	0
							Assessments:	2	0
							Totals:	3.5	0
							Award Amount:		\$ 1850.00

6.3 Providers can make corrections to the participants application until The Department has placed the application into the "Under Review" status.

7.0 Assessment Tab

The Assessment Tab reflects the assessments required. In this example, the participant passed the reading and writing portions of the Ohio Graduation Tests prior to enrolling in the Program. This is denoted under the *Status* as *Approved*. The status for Mathematics, Social Studies, and Science says *Correction Needed* since these assessments have not yet been passed.

Assessment information can be entered by clicking on the edit icon located to the far right of the row.

Student's Assessme	ents:							
SUBJECT	EXAM GRADE CODE	TEST DATE	ASSESSMENT TYPE	TEST SCORE	DATA SOURCE	STATUS	ACTIONS	
Reading			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	G
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6

7.1 Entering Assessment Data

This step would be completed after the participant application has been reviewed (Awarded) by the Ohio Department of Education and is Accepted by the HSD Nominator. Assessment information can be entered for the following data requirements: Subject, Grade level, Test date, Assessment type, and Test score.

The drop-down menu shown below identifies the current options available to replace the Ohio Graduation Test. In this example, the participant earned a remediation free score on the ACT.





Enter the test date and the passing score. Click the Save icon.

······		IN THIS CONCERNMENT OF THE PARTY OF THE PART	. approved	THE FOLDER FOR THE STREET	\sim
Mathematics V 10th Grade 08/03/2022	ACT ~ (70d	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	(0) (0)
Social Studies	Edit to select	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6
Science	Edit to select	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ß

Click the *Submit* button.

Social Studies Edit to select MANUALLY ENTERED Correction Needed Edit to select- Correction Needed Correction Needed Edit to select-	Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6
ScienceEdit to select MANUALLY ENTERED Correction Needed Edit Repursi Whow 0	Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6
	Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6

An assessment document is required to Submit.

hio Departr	nent			Welcome : N	and blig	×	SAFE HOME ABOUT ODE	+ LOGOUT Session 1
			DASHBOARD			S CONTACTS+		5 200001
			DASHBOARD	Assessment document is required	i.	S CONTACTS+		
						Close		
Adule: Student	2+ Adult High School Diploma Program 🗸 🗸			_				
	24 Adult High School Liptoma Program V							
PREVIOUS			ID: 1022003 Na	me: Aarika Renee Dorsey	Period: Adult Learner FY 2023 Typ	e: Renewal Status: Started		NEXT> Back to student
wing student: 9 of 41								
tudent Application	Past Credits Earned Credi	Recovery Plan Asses	sment Docs Assurances	Status / Flags Com	ments / History			
Student Informatio	on							
Primary Provider: 13326	4. Dohn Community				SSID:			
DOB: 04/11/1984					Ethnicity: Black, Non-Hispa	inic		
Current Grade Level: No	t Specified				Submitted Document Type: I	NONE		
Gender: F								
Student's Assessr	nents:							
SUBJECT	EXAM GRADE CODE	TEST DATE	ASSESSMENT TYPE	TEST SCORE	DATA SOURCE	STATUS	ACTIONS	
Reading			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Correction Needed	Submit Request Walver	0
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	0
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	C

Once the document has been uploaded, the HSD Nominator clicks *Submit*. A confirmation message will appear, click Yes to submit.



hio Departm	nent				Welco	me : Nancy Byrd	_		SAFE HOME ABOUT ODE S		
NIO of Éduca	tion				Please Confirm		×			- D LO	GOUT Session T
	i and the second se			DASHBOARD P	Are you sure you want t	o perform the action Submit?	S	CONTACTS -			
							Yes No				
Module: Student					_						
Program Selected: 22	+ Adult High School Diploma Pro	gram 🗸									
PREVIOUS				ID: 1022003 Name	: Aarika Renee Do	rsey Period: Adult Learner FY 2023	Type: Renewal	Status: Started		NEXT >	Back to student :
ewing student: 9 of 41										_	
						Comments / History					
Student Application	Past Credits Earned	Credit Recovery Plan	Assessment	Docs Assurances	Status / Flags	Comments / History					
Student Informatio	n										
Primary Provider: 13326	, Donn Community					SSID: Ethnicity: Black, M	lon Hispanis				
Current Grade Level: No	t Specified					Submitted Docum					
Gender: F											
Student's Assessn	ients:										
Student's Assessn	nents:	TEST DATE	ASSE	SSMENT TYPE	TEST SCORE	DATA SOURCE		TATUS	ACTIONS		
SUBJECT		TEST DATE		ISSMENT TYPE	TEST SCORE	DATA SOURCE MANUALLY ENTERED			Actions No Action Available		
		TEST DATE	Edi		TEST SCORE		Å	TATUS pproved			

The status for the assessment will change to Approved.

Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Approved	No Action Available	
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ß
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ß

7.2 Assessment Waiver Request

Participants who have an IEP exemption may not be required to complete assessments. To request a waiver, complete the following steps.

Click Request Waiver button.

Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Approved	No Action Available	
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ø
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ø

A confirmation message will appear. Click Yes.



Please Confirm		×	
Are you sure you want to perform	the action Request Waiver?	s	CONTACT
		Yes No	

To request a waiver, an IEP document is required. Upload the participant's IEP document under the *Documents* tab.

	Welcome : Nancy Byrd		
		×	
DARD P	IEP document is required.	s	CONTACTS -
		Close	

Once the IEP document is uploaded, the status will change to Waiver Requested.

			10 March 10		
Social Studies	Edit to select	MANUALLY ENTERED	Waiver Requested	No Action Available	
Science	Edit to select	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	0

Once the waiver request has been reviewed and approved, the status will change to Approved.

· · · · · · · · · · · · · · · · · · ·	Lan to purch	THE REPORT NAME IN ADDRESS OF TAXABLE	- and a second		
Mathematics 10 08/11/2	2022 ACT 700	MANUALLY ENTERED	Approved	No Action Available	
Social Studies	Edit to select	MANUALLY ENTERED	Approved	No Action Available	
Science	Edit to select	MANUALLY ENTERED	Correction Needed	Submit Request Waiver 3	

8.0 Documents Tab

Two documents are REQUIRED to submit the adult participant's Competency-Based Diploma application: Proof of Address and Age Verification. Proof of Address should show the individual's name, address, and date, such as a utility bill. This document needs to be dated no more than three months. Junk mail is not a valid proof of address. Age may be verified by uploading a copy of the participant's driver's license, state ID, etc.

8.1 To upload the Proof of Address, click *Proof of Address* in the yellow box. A screen will appear like the one below. Use the *Choose File* button to locate the document to upload. Once the document is selected, click the *Upload* button.



Onio of Education		1 Document Upload		×		LOGOUT Session Timeou	ut 00:29
Module Shudert Program Salated Zzewan ngi Sawa Payna V Studert Application (Past Cedit Earned Creati Recovery Plan) Assessme	nt Docs Assurances	Document Type Select Document Type. Select Document Type. Mod C Adores Apple Methodic Selection Port Transport Work IA: Code Assessment Selection (Selection) Selection (Selec	n stand fra doutrent (pe pe mod like to here the doutrent) person at a fine. The stand of the stand like. The stand of performance of the stand like.	liter unter		Bash to student seried	ih results
· · · · · ·	Documents On File	port Document(s) From Other Progra				🗶 Delete Documen	nt(s)
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				No bocuments on Pile.			
l l							

Once the file is uploaded, a pop-up window will appear.

	adocumentqa.ode.s	state.oh.us
https://docume	ntqa.ode.state.oh.us/Home/Upload	
The file ha document		h button" on the previous screen to see this

8.2 Once the file is uploaded, refresh the page by hitting the *Refresh* buttons next to each document. The uploaded document should appear.

Student Application Past Credits Earned Credit Recovery Plan	Assessment Docs	Assurances Status / Flags Comme	ents / History			
Uploaded Document Type	Documents On File					^
* Proof of Address 1	2 Upload Document(s)	Limport Document(s) From Other Programs				X Delete Document(s)
* Age Verification 1	Returned 2 results.					
					\frown	FILTER:
	NAME	TYPE	DATE UPLOADED	REVIEWED	HISTORY	DELETE
	txt.txt	Age Verification	03/01/2022	No	٦	
	excel.xisx	Proof of Address	03/01/2022	No	2	0
					$\mathbf{\nabla}$	- 1 -

9.0 Assurances Tab

All roles should see the assurance tab. Nominator should have access to agree to the Assurances. As per the requirement, the superintendent, superintendent's designee, or HSD Authorizer can accept the assurance tab.



Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History
Assurances
Ohio Department of Education Assurances
Provider status and funding for the 22+ Adult High School Program are contingent upon complying with the following assurances.
Provider will not begin coursework or assessments until an application reaches awarded status.
Provider will only submit evidence of credits and assessments earned while a participant was enrolled and participating in the 22+ Adult High School Program.
Provider will submit evidence or seek funding for credits or assessments earned by the participant prior to enrolling in the 22+Adult High School Program for which "prior credit earned" has been determined.
Provider will incur costs at their own expense when participants are enrolled and served beyond what the allocation supports in a fascal year.
Providers will give career counseling to all participants.
By signing this document, Lam confirming that I have authority to act on behalf of Provider, and I an aware that any false statements made herein may require Provider to return funds that have already been awarded, forfeit future funds, or lose status as an approved provider for the 22* Adult High School Program.
Asthorzed User

Until the nominator agrees to the assurances, all other users (admin.) will see the "Assurance pending" status.

Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History
Assurances
Ohio Department of Education Assurances
Provider status and funding for the Z2+ Adult High School Program are contingent upon complying with the following assurances.
Provider will not begin coursework or assessments until an application reaches awarded status.
Provider will only submit evidence of credits and assessments earned while a participant was enrolled and participating in the 22+ Adult High School Program.
Or Provider will submit evidence or seek funding for credits or assessments earned by the participant prior to enrolling in the 22+Aduit High School Program for which "prior credit earned" has been determined.
O Provider will incur costs at their own expense when participants are enrolled and served beyond what the allocation supports in a facal year.
Providers will give career counseling to all participants.
By signing this document, Lan confirming that I have authority to act on behalf of Provider, and I am aware that any false statements made herein may require Provider to return funds that have already been awaredd, forfeit future funds, or lose status as an approved provider for the 22+Adult His School Provoram.
∑ Assurances Pending

User will see the below validation message if they haven't agreed to the assurances before submitting the student application.

These assurances apply to the New and Renewal applications.

JIIIO of Education	System Action Message ×	COCOUT Session 1
	Could not change status to "Submitted" at this time for the following reasons: - Anumnon mult be agreed under Anuranox' tab.	
Module: Student Program Selected: 22+ Adut High School Dploma Program	Øor	l l
	D 886465 Name Daniel J Bathke Period: Adukt Learner FY 2022 Type New Status: Status	Back to student
Student Application Past Credits Earned Credit Recovery Plan Assessme	nt Docs Assurances Status / Flags Comments / History	
Applied Flags		Status
		CURRENT APPLICATION STATUS Started
		UPDATE APPLICATION STATUS TO: Submitted

10.0 Status/Flags Tab

10.1 To submit a participant application, click on *Submitted*. To withdraw a participant, click on *Withdrawn*.



ident Application Past C	Credits Earned Credit Recovery Plan	ssessment Docs Assurances	Status / Flags Commen	its / History		-
pplied Flags						Status
						CURRENT APPLICATION STATUS Started
						UPDATE APPLICATION STATUS TO: Submitted

10.2 Once the participant application is submitted, the status will change to Submitted.

Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History	
Applied Flags	Status
	CURRENT APPLICATION STATUS Submitted
	UPDATE APPLICATION STATUS TO: Withdrawn
	or
	Correction Needed

11.0 Comments/History Tab

Use the Comments section to makes historical notes regarding the adult participant application that may be needed later for clarification. The History section is an automatic record of actions taken and includes the date, time, person's name, and application's status change.

Student	Application	Past Credits Earned	Credit Recovery Plan	Assessment Docs	Assurances	Status / Flags	Comments / Hist	tory			
Comm	ents Summary						0		Comment		0
Add Net	- Subject								Note: Comments are for information only. Recipier	nts are not notified when a comment is ente	red.
Last Update	đ		Subject	Last Updated By							
								SL	ubject: essage		
								Sh	owing Page 0 of 0		Reply
								-	Application History		0
									Date	Created By	Status
									3/1/2022 1:05:54 PM	Carla Campesino	Submitted
									3/1/2022 12:34:40 PM	Carla Campesino	Started

12.0 Student Application Review Process

After the provider submits the participant application, the Program Administrator reviews the application and clicks one of the following:

- Review Completed if there are no errors;
- Correction Needed if the application needs corrections; or





- Not Eligible if the participant is not eligible to enroll in the program; or
- *Waitlisted* if the remaining provider bucket funds are not sufficient to cover the number of participant credits left to complete.

If the Program Administrator clicks *Review Completed* the Application changes to *Eligible*, then *Awarded*. The HSD Nominator has two options:

- 1. Accepts the application on the Status/Flags Tab or
- 2. Declines the application, which results in no funding.

Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History	
Applied Flags	Status CURRENT APPLICATION STATUS
	Awarded
	UPDATE APPLICATION STATUS TO: Accepted
	or Declined

13.0 Searching Existing Student Applications

To search for an existing participant application, select Search Student Application from the Student Menu.

Ohio	.gov	Departr of Educa	nent ation				
Dashboard	Provider 🗢	Student 🗢	Finance 🗢	Compliance 🗢	User Manuals and Forms	Contacts 🗢	
Program I	Information	Search Stu Application					
Module	: Student	New Stude	nt Applicati	on			
	Selected: 22	Renew Stu Application		ogram 🗘			
046326 - 0	Clermont Nort	Task Mana	gement				

14.0 Advanced Student Search Page

Click *search* in the bottom left to obtain a list of all participants for the Application Period selected. To view a participant's application, click on the *Details* button located to the far right of the existing participant application.



*Note – select the correct *Application Period* in the dropdown box.

					ADVAN	CED STUDENT SE	ARCH PA	GE				
BASIC SEARCH	H St	SID SEAR	CH ASSESSMENT	SEARCH								
								AP	PLICATION STATUS:			
APPLICAT	ION ID:			APPLICATI	ON PERIOD: Adul	t Learner FY			cepted			
STUD	ENT ID:			APPLICA	TION TYPE: All	\$			varded			
	SSID:		cu	RRENT GR	ADE LEVEL: All	\$			eclined			
FIRST	NAME:			PROV	DER NAME: Clerm	ont Northeastern Local			gible ot Eligible			
LAST	NAME:			PRO	OVIDER IRN: 04632	26 g SHOW	ONLY MY ST		equirements Passed			
	DOB:			DIST	RICT NAME:				esubmitted eview Completed			
								St	arted			
DATE SUBN	IITTED:			DI	STRICT IRN:				Ibmitted rminated			
HAS FATAL FL	AG(S):	All	\$]	SC	RT ORDER: Date	Started, Status, Name	\$					- 1
Search Res		<u> </u>					<u> </u>					
Courter (Ite.	ici i											
					Basic	Search - 36 result(s) re	turned.					
ME	GRADE	APP ID	PROGRAM PERIOD	STUDENT	PRIMARY PROVIDE	R PRIMARY PROVIDER	DISTRICT IRN	DISTRICT OF RESIDENCE	APP STATUS	DATE SUBMITTED	APP TYPE	DETA
A	••	410397	Adult Learner FY 2018	221273	046326	Clermont Northeastern Local	046326	Clermont North Local	eastern Requirements Passed	1/26/2018	New	G
irby, Jerry Dean	**	410457	Adult Learner FY 2018	221319	046326	Clermont Northeastern Local	046359	West Clermont	Local Started		New	G
	**	410597	Adult Learner FY 2018	221459	046326	Clermont Northeastern Local	046326	Clermont North Local	eastern Requirements Passed	1/26/2018	New	
James		Construction and the									10007-0010	C
James M	**	410599	Adult Learner FY 2018	3 221461	046326	Clermont Northeastern Local	045500	Milford Exempt Village	ed Requirements Passed	3/20/2018	New	6
		410599 410595	Adult Learner FY 2018 Adult Learner FY 2018		046326 046326		045500 046342			3/20/2018	New	

The existing Student Information page provides the general information initially entered for the participant. To edit the participant's information, click on the Edit Icon (pencil tool) located at the top of each section. Other participant application pages can be accessed by clicking on the desired tab located along the top of the page. If you have questions or need to edit the information on these pages, please follow the steps and guidance provided for the page provided above.



(oniors armans

Renewal Student Application

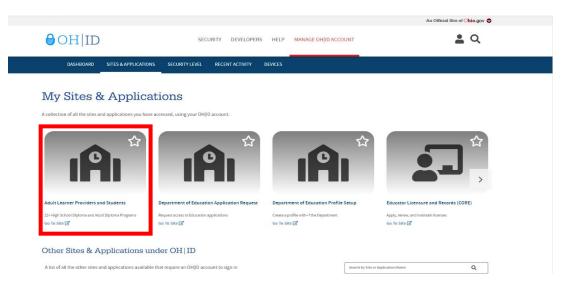
1.0 Completing the Student Application

Completing the Student Application is the Provider's responsibility. Providers may enroll participants into the system once the Ohio Department of Education approves the provider to offer the Competency-Based Diploma Pilot Program and the participant application window is open. The adult participant **MUST** create and confirm theirSAFE account **BEFORE** beginning this process.

1.1 Sign in to OH|ID Portal. (https://safe.ode.state.oh.us/portal/)

⊖OH ID	
Log in to your OH ID account to access multiple state applications.	
User ID	
FORGOT YOUR USER ID?	
Password	
FORGOT PASSWORD?	
🔒 Log In	
LOGIN HELP FIRST TIME USER?	

1.2 Click the Adult Learner Application tile

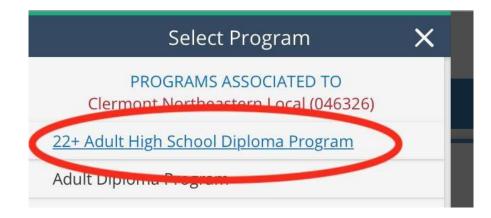


1.3 The Dashboard will appear. Click *Select Program* in the top left.

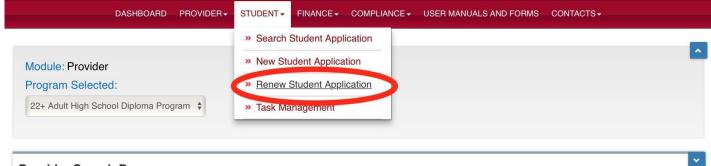


Ohio Department of Education	Welcome : KE 046326 - Clermont I		D LOGOUT	Session Timeout:00:56:27
Select Program	Adult Da	shboard		👤 You Tube
ANNOUNCEMENTS	0		IN OPEN STATUS 0	
		MY OPEN TASKS		GROUP TASKS

1.4 In the window that appears on the left, click on 22+ High School Diploma Program.



1.5 Hover over the Student Tab located in the top left of the page. Select *Renew Student Application*.



Provider Search Page

2.0 Student Search for Creating a Renewal Application



2.1 A list of selected participants will appear. Click on "Click here to complete renewal applications."

and Deville	Students Renewal Status	×
	Welcome : Christina Collins SAFE HO	ABOUT ODE STATE AGENCIES ONLINE SERVICES Ohio.
bio Department of Education	System Action Message	X LOGOUT Session Timeout 00.2
	Could not change status to "Submitted" at this time for the following reasons:	
Module: Student	There are other applications for this student in the previous period that have not reached Withdrawn, Declined or Terminated.	
Program Selected: 22+ Adult High School Diploma Program		ok D
	ID: 762264 Name: Montell D Smith Period: Adult Learner FY 2021 Type: Renewal Status: Status	
	ID 762264 Nome Montell D Smith Period: Adult Learner FY 2021 Type Renewal Status: Stat	rted Back to student renewal sear resu
Student Application Past Credits Farmed Cred		Back to student renewal sear
Student Application Past Credits Earned Cred	ID: 762264 Nome: Montell D Smith Perfod: Adult Learner FY 2021 Type Renewal Status: Status It Recovery Plan Assessment Docs Status / Flags Comments / History	Back to student renewal sear
		Back to student renewal sear
		Back to studient renewal war resu
		Back to student renewal war resu Status CURRENT APPLICATION STATUS Started UPDATE APPLICATION STATUS TO
Student Application Past Credits Earned Cred		Back to studient revenues warness

- 2.2 Auto Approval: A dialogue box will appear, click OK.
- **2.3** Under the Status/Flags Tab, providers can view the status of the application. The application will be moved to *Awarded* status if the provider has sufficient bucket funds.

ID: 950335 Name Marian Varae Jaynes Period: Adult Learner FV 2023 Type: Renewal Status: Started		Back to student renewal search result
Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History		
Applied Flags Fad Invises Outstanding (Beaudides: Resine outpanding mores before prosecting)	Status CURRENT APPLICATION STATUS Awarded UPONE ANY DUCATION STATUS TO: <u>Accepted</u> or <u>Declined</u>	

2.4 The application will be moved to *Waitlisted* status if the provider has insufficient bucket funds.

Student Application Pest Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History	
Applied Flags	Status CURRENT APPLICATION STATUS Warilisted
	UPDATE APPLICATION STATUS TO: Withdrawn

3.0 Credit Recovery Plan

3.1 The system automatically creates an individualized Credit Recovery Plan for renewal participants based on the content and elective courses and assessments the participant is required to pass in order to meet the minimum graduation requirements.



Year One Year Two										
ONTENT SUBJECTS	PLANNED	PASSED	ELECTIVE SUBJEC	TS	PLANNED	PASSED	ASSESMENT SUBJECTS	Current Status		
			Business/Tech	inology	0.0 🗸	0	Mathematics	Status: STARTED		
			Fine Arts		0.0 🗸	0	Science	SIBUS, STARTED		
							Social Studies	Summary		
			Foreign Langu	lage	0.0 🗸	0			PTION 2 TRACK SELEC	TED
			English Langu	age Arts	0.0 🛩	0			Planned	Passed
			Mathematics		0.0 🗸	0		Content:	0	Passed
			Social Studies		0.0 🗸	0		Electives:	0.0	0
									3	0
			Science		0.0 🛩	0		Assessments:	-	
			Career Techni	cal	0.0 🛩	0		Totals:	3.0	0
							*	Award Amount:		\$ 1200.00
								Total Paid So Far:		

3.2 The HSD Nominator meets with the participant to review the participant's goals and identify the courses, electives, and assessments the participant must complete to graduate. In the example below, the participant plans to complete 0.5 content credits, 1.0 elective credits, and two assessments. The plan is in *Started* Status.

			ID: 950332 Name: justin laube	r Period: Adul	Learner FY 202	2 Type: New Status: Started			Back to student search
tudent Application Past Credits	Earned Credit Recovery F	Plan Assess	ament Docs Assurances Status / Flags	Comments / His	tory				
Year One	PLANNED	PASSED	ELECTIVE SUBJECTS	PLANNED	PASSED	ASSESMENT SUBJECTS	Current Status		
Social Studies			Foreign Language	0.0 🗸	0	Science			
American Government	0.5 🗸	0	Fine Arts	0.0 ¥	0	Social Studies	Status: STARTED		
			Business	1.0 ~	0		Graduating Info		
			Career Technical	0.0 ¥	0		I plan on graduati	ng this year.	
			Family and Consumer Sciences	0.0 🗸	0		Summary		
			Technology	0.0 🗸	0		OF	TION 1 TRACK SELECT	/ED
			Agricultural Education	0.0 🗸	0			Planned	Passed
			Junior Reserve Officer Training Corps (JROTC)	0.0 🗸	0		Content:	0.5	0
			program			-	Electives:	1.0	0
							Assessments:	2	0
							Totals:	3.5	0
							Award Amount:		\$ 1850.00
							Total Paid So Far:		S
	** The success pla	n details which cre	dit(s) the student plans to complete <u>this</u> year					Finalize Plan	Save Can

Clicking *Save* allows the HSD Nominator to double check and edit the information. You will see a pop-up window stating, "*Please wait*" but there is no pop-up window to state that the information was saved. The amount of funding for the adult participant is located at the bottom right of the window.

After verifying the information on the Credit Recovery Plan is accurate, click *Finalize Plan*. If the informationis accurate, click *OK*. If corrections are needed, click *Cancel*.

3.3 Once the Credit Recovery Plan has been finalized, the date cannot be changed or updated. Therefore, it is imperative to double check the accuracy of the data **before** clicking Yes.





hio Department of Education			Welcome : C Please Confirm	harmayne Benkovsky	_	×		E ABOUT ODE STATE AGENCIES	ONLINE SERVICES
loduie: Student			DASHBOARD P Once you finalize the	credit recovery plan, you will no 'the data before clicking 'Hes'.	st be able to change or	votere it. Plasses			
Program Selected. 22+ Adult High School Diplom	aPagan V								
			ID: 950332 Name: justin laut	er Period: Adult Le	amer FY 2022	Type: New Status: Started			Back to student searc
Student Application Past Credits Earn	ned Credit Recovery Plan A	ssessment Do	cs Assurances Status / Flags Comments / Histo	ху					
Year One									
	PUNKED		ELECTIVE BURLECTS	PLANNED		ASSEMENT SUBJECTS	Current Status		
Social Studies			Foreign Language	0.0 🗸	0	E Science	Status: STARTED		
American Government	0.5 🗸	0	Fine Arts	0.0 🗸	0	Ø Social Studies			
			Business	1.0 🗸	0		Graduating Info		
			Career Technical	0.0 ¥	0		I plan on graduating	g this year.	
			Family and Consumer Sciences	0.0 🗸	0		Summary		
			Family and Consumer Sciences Technology	0.0 ~	0		Summary	OPTION 1 TRACK SELECTED)
								OPTION 1 TRACK SELECTED) Passod
			Technology	0.0 ¥	0				
			Technology Agricultural Education	0.0 ¥	0			Planned	Passed
			Technology Agricultural Education	0.0 ¥	0		Content:	Planned 0.5	Passed 0
			Technology Agricultural Education	0.0 ¥	0		Content: Electives:	Planned 0.5 1.0	Passed D
			Technology Agricultural Education	0.0 ¥	0		Content: Electives: Assessments:	Planned 0.5 1.0 2	Passed 0 0

3.4 Click Yes to finalize the Credit Recovery Plan.

4.0 Assessment Tab

The system automatically populates assessment information for the participant based on the information entered on the Past Credits Earned tab. In this example, the participant passed the reading and writing



portions of the Ohio Graduation Tests. This is denoted under the *Status* as *Approved*. The status for Mathematics, Social Studies, and Science says *Correction Needed* since these assessments have not yet been passed.

Assessment information can be entered by clicking on the edit icon located to the far right of the row.

Student's Assess	Studen's Assessments:									
SUBJECT	EXAM GRADE CODE	TEST DATE	ASSESSMENT TYPE	TEST SCORE	DATA SOURCE	STATUS	ACTIONS			
Reading			Edit to select		MANUALLY ENTERED	Approved	No Action Available			
Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available			
Mathematics			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver			
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Walver	6		
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver			

4.1 Entering Assessment Data

This step would be completed after the participant application has been reviewed (Awarded) by the Ohio Department of Education and is Accepted by the HSD Nominator. Assessment information can be entered for the following data requirements: Subject, Grade level, Test date, Assessment type, and Test score.

The drop-down menu shown below identifies the current options available to replace the Ohio Graduation Test. In this example, the participant earned a remediation free score on the ACT.



Enter the test date and the passing score. Click the Save icon.



Click the Submit button.

Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	6
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ø
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ø

An assessment document is required to Submit.



hio Departm	nent tion			Welcome : Na	incy Byra	X	SAPE HOME ABOUT ODE S	TATE AGENCIES ONLINE SERVICES
			DASHBOARD	Assessment document is required		IS CONTACTS+		
Module: Student Program Selected: 22	+ Adult High School Diploma Program	•				Close		
PREVIOUS wing student: 9 of 41			ID: 1022003	Name: Aarika Renee Dorsey	Period: Adult Learner FY 2023 Ty	vpe: Renewal Status: Started		NEXT > Back to student se
Student Application	Past Credits Earned Cred	dit Recovery Plan Asses	sment Docs Assurance	ces Status / Flags Com	nents / History			
Student Informatio	n							
Primary Provider: 13326	4, Dohn Community				SSID:			
DOB: 04/11/1984					Ethnicity: Black, Non-Hisp	panic		
Current Grade Level: No	t Specified				Submitted Document Type	E NONE		
Gender: F								
Student's Assess	nents:							
SUBJECT	EXAM GRADE CODE	TEST DATE	ASSESSMENT TYPE	TEST SCORE	DATA SOURCE	STATUS	ACTIONS	
Reading			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Correction Needed	Submit Request Walver	G
			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	Ø
Social Studies								

Once the document has been uploaded, the HSD Nominator clicks *Submit*. A confirmation message will appear, click Yes to submit.

hio Departm	nent			Welcome :	Nancy Byrd		SAFE HOME ABOUT ODE	STATE AGENCIES ONLINE SERVICES
nio of Educa	ition			Please Confirm		×		LOGOUT Session
				Are you sure you want to perf	orm the action Submit?	S CONTACTS +		
					- C	IN NO		
Module: Student								
Program Selected: 22	2+ Adult High School Diploma Program 🗸 🗸							
PREVIOUS			ID: 1022003 Na	me: Aarika Renee Dorsey	Period: Adult Learner FY 2023 Ty	e: Renewal Status: Started		NEXT > Back to student
ewing student: 9 of 41								
Student Application	Past Credits Earned Credit	t Recovery Plan Asses	sment Docs Assurances	Status / Flags Co	omments / History			
Student Informatio	20							
Primary Provider: 13326	4, Dohn Community				SSID:			
DOB: 04/11/1984					Ethnicity: Black, Non-Hisp			
Current Grade Level: No Gender: F	t Specified				Submitted Document Type:	NONE		
Gender: P								
Student's Assessm	nents:							
SUBJECT	EXAM GRADE CODE	TEST DATE	ASSESSMENT TYPE	TEST SCORE	DATA SOURCE	STATUS	ACTIONS	
Reading			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	G

The status for the assessment will change to Approved.

Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Approved	No Action Available	
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ø
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ß

4.2 Assessment Waiver Request



Participants who have an IEP exemption may not be required to complete assessments. To request a waiver, complete the following steps.

Click Request Waiver button.

Writing			Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Mathematics	10	08/11/2022	ACT	700	MANUALLY ENTERED	Approved	No Action Available	
Social Studies			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	8
Science			Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ß

A confirmation message will appear. Click Yes.

	vveicome : Nancy Byra		
	Please Confirm ×		
F	Are you sure you want to perform the action Request Waiver?	s	CONTACTS
	Yes No		

To request a waiver, an IEP document is required. Upload the participant's IEP document under the *Documents* tab.

	Welcome : Nancy Byrd		
		×	
DARD P	IEP document is required.		S CONTACTS-
		Close	

Once the IEP document is uploaded, the status will change to Waiver Requested.

Social Studies	Edit to select	MANUALLY ENTERED	Waiver Requested	No Action Available	
Science	Edit to select	MANUALLY ENTERED	Correction Needed	Submit Request Waiver	ø

Once the waiver request has been reviewed and approved, the status will change to Approved.

Mathematics 10	08/11/2022	ACT	700	MANUALLY ENTERED	Approved	No Action Available	
Social Studies		Edit to select		MANUALLY ENTERED	Approved	No Action Available	
Science		Edit to select		MANUALLY ENTERED	Correction Needed	Submit Request Waiver	0

5.0 Documents Tab

Two documents are REQUIRED to submit the adult participant's Competency-Based Diploma application: Proof of Address and Age Verification. Proof of Address should show the individual's name, address, and date, such as a utility bill. This document needs to be dated no more than three months. Junk mail is not a valid proof of address. Age may be verified by uploading a copy of the participant's driver's license, state ID, etc.

5.1 To upload the Proof of Address, click *Proof of Address* in the yellow box. A screen will appear like the one below. Use the *Choose File* button to locate the document to upload. Once the document is selected, click the *Upload* button.

IIIO ef Education	1 Document	Upload	×		L0G0UT Session Timeout00:
Motule: Student Program Selected 22+Ada Hys Salod Dynas Prepar. V Student Application Pear Credits Earned Credit Recovery Pen Assessm	dina giora Agui Vela Agui Vela Per Taoa Vena Lib Aussamm dos, doo	ument Type. V annot Type. V con con con con con con con con			Back to student wants area
Uploaded Document Type	Documents On File		() Close		
"Following required documents are not uploaded. () Proof of Address	Liplead Document(s)	rom Other Programs			🗶 Delete Document(s)
() Age Verification					PLTIR
	NAME TYPE	DATE UPLOADED	REVENED	HISTORY	O DELETE
			No Documents on File.		

Alternatively, documents may be imported from previous applications by selecting *Import Documents* from Other Programs.

Dio Department		We	icome : Charmayne Benkovs	ку		-	SAFE HOME ABOUT ODE	
hio Department of Education		Import Documents				×		1 LOGOUT Session Time
		Returned 4 results.						
Adule: Student		NAME	TYPE	DATE	IMPORT			
rogram Selected: 22+ Adult High School Diploma Program 👻		POR.PNG	Proof of Address	10/06/2021	0			
		ID.PNG	Age Verification	10/06/2021	8			
		GA Transcript.pdf	Prior Transcript	10/06/2021		rted		Back to student renewal sear
		Transcript.pdf	Prior Transcript	10/06/2021				
Uploaded Document Type	Documents On	File						
* Proof of Address	1 Upload Document	1 Import Document(s) From	Diret Programs					X Datete Docum
Proof of Address		1 Import Document(s) From				-		
Proof of Address	1 Upload Document	1 Import Document(s) From		MTE UPLOADED		REVIENED	HINTORY	RUDE COLOR
Proof of Address	Uptoad Decomer Returned 2 result	1 Linport Document(s) From		MTE UPLOADED 3/08/2022		reviewed No	HETOKY D	FILTER
* Proof of Address	Uptoart Document Returned 2 result NAME	Import Document(s) From						
Uploaded Document Type	Returned 2 results	Tope Age Verification		3/08/2022		No		

5.2 Once the file is uploaded, refresh the page by hitting the *Refresh* button on the bottom right side of the page. The uploaded document(s) should appear.

6.0 Assurances Tab

All roles should see the assurance tab. Nominator should have access to agree to the Assurances. As per the requirement, the superintendent, superintendent's designee, or HSD Authorizer can accept the assurance tab.



Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History								
·								
Assurances								
Ohio Department of Education Assurances								
Provider status and funding for the 22- Adult High School Program are contingent upon complying with the following assurances.								
Provider will not begin coursework or assessments until an application reaches awarded status.								
2 Provider will only submit evidence of credits and assessments earned while a participant was enrolled and participating in the 22+ Adult High School Program.								
O Provider will submit evidence or seek funding for credits or assessments earned by the participant prior to enrolling in the 22+Adult High School Program for which "prior credit earned" has been determined.								
O Provider will incur costs at their own expense when participants are enrolled and served beyond what the allocation supports in a fiscal year.								
Providers will give career counseling to all participants.								
By signing this document, Lam confirming that I have authority to act on behalf of Provider, and I am aware that any false statements made herein may require Provider to return funds that have already been awarded, forfeit future funds, or lose status as an approved provider for the 22+ Adult High School Program.								
Authorzed User								

Until the nominator agrees to the assurances, all other users (admin.) will see the "Assurance pending" status.

Student	Application	Past Credits Earned	Credit Recovery Plan	Assessment	Docs Assu	rances Status / Fla	as Comments / History	
Student	Application	Past Credits Earned	Credit Recovery Plan	Assessment	Docs Assi	status / Fia	gs Comments / history	
Assura	ances							
						Ohio Depart	tment of Education A	ssurances
Provide	r status and fund	ing for the 22+ Adult Hig	ph School Program are con	tingent upon comp	olying with the fo	lowing assurances.		
0	Provider will not b	agin coursework or assess	sments until an application re	aches awarded stat	US.			
0	Provider will only a	ubmit evidence of credits	and assessments earned wh	ile a participant was	s enrolled and part	cipating in the 22+ Adult	High School Program.	
0	Provider will subm	it evidence or seek fundin	g for credits or assessments	earned by the partie	cipant prior to enro	ling in the 22+Adult High	School Program for which "pri	or credit earned" has been determined.
0	Provider will incur	costs at their own expens-	e when participants are enrol	led and served bey	ond what the alloc	tion supports in a fiscal y	year.	
0	Providers will give	career counseling to all p	articipants.					
	ing this documer Program.	t, Lam confirming that I	have authority to act on be	half of Provider , a	ind I am aware th	at any false statements	made herein may require Pro	vider to return funds that have already been awarded, forfeit future funds, or lose status as an approved provider for the 22+ Adult High
	surances Per							

User will see the below validation message if they haven't agreed to the assurances before submitting the student application.

These assurances apply to the New and Renewal applications.

OTTIO of Education	System Action Message 🗙	COGOUT Session Tir
	Could not change status to "tabmitted" at this time for the following reasons: - Assemes mut be agreed under Assumour tab.	
Module: Student Program Selected: 22+ Adut High School Optems Pregram	● DK	
	D 898465 Name Daniel J Bathke Period: Adult Learner FY 2022 Type New Status: Started	Back to student se
Student Application Past Credits Earned Credit Recovery Plan Assessme	ent Docs Assurances Status / Flags Comments / History	
Applied Flags		Status
		CURRENT APPLICATION STATUS Started
		UPDATE APPLICATION STATUS TO: Submitted
		or <u>Withdrawn</u>

7.0 Status/Flags Tab

7.1 To submit a participant application, click on *Submitted*. To withdraw a participant, click on *Withdrawn*.



Applied Flags Applied Flags Status CURRENT APPLICATION STATUS Stated UPDATE APPLICATION STATUS TO: Submitted Submitted Or of the second status to	Status / Flags Comments / History	Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History
Started	Status	Applied Flags
Withdrawn	or Withdrawn	

7.2 Once the participant application is submitted, the status will change to Submitted.

Student Application Past Credits Earner	d Credit Recovery Plan Assessment Docs Assurances	Status / Flags Comments / History
Applied Flags		Status
		CURREN Submitte
		UPDATE / Withdra

8.0 Comments/History Tab

Use the Comments section to makes historical notes regarding the adult participant application that may be needed later for clarification. The History section is an automatic record of actions taken and includes the date, time, person's name, and application's status change.

Student	Application	Past Credits Earned	Credit Recovery Plan	Assessment	Docs	Assurances	Status / Flags	Comments / Histo	ry
Comme	ents Summar	/						0	Comment
Add Net	s Subject								Note: Comments are for information only. Recipients are not notified when a comment is entered.
Last Updates			Subject	Last Updat	ted By				
									Subject: Message
									Showing Page 0 of 0
									Application History
									Date Oriented By Status
									Dene Creared By Dena 31/2022 105 S4 PM Carla Campetino Submitted

9.0 Student Application Review Process

After the provider submits the participant application, the Program Administrator reviews the application and clicks one of the following:



- Review Completed if there are no errors;
- Correction Needed if the application needs corrections; or
- Not Eligible if the participant is not eligible to enroll in the program; or
- *Waitlisted* if the remaining provider bucket funds are not sufficient to cover the number of participant credits left to complete.

If the Program Administrator clicks *Review Completed* the Application changes to *Eligible*, then *Awarded*. The HSD Nominator has two options:

- 1. Accepts the application on the Status/Flags Tab
 - or
- 2. Declines the application, which results in no funding.

Student Application Past Credits Earned Credit Recovery Plan Assessment Docs Assurances Status / Flags Comments / History	
Applied Flags	Status CURRENT APPLICATION STATUS Awarded UPDATE APPLICATION STATUS TO: Accepted or Declined

10.0 Searching Existing Student Applications

To search for an existing participant application, select Search Student Application from the Student Menu.

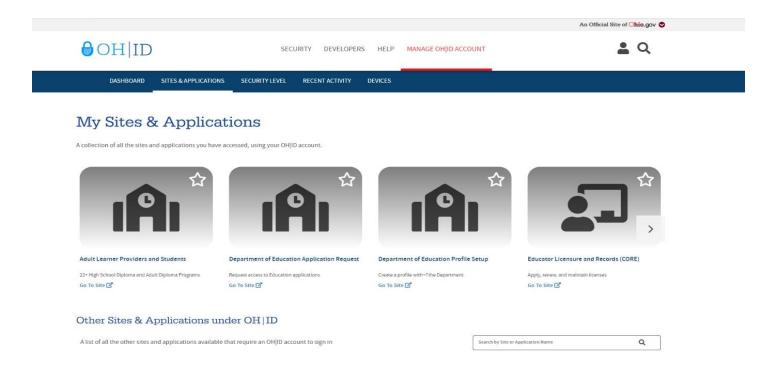
Ohio	.gov	Department of Education						
Dashboard	Provider 🗢	Student 🗢	Finance 🗢	Compliance 🗢	User Manuals and Forms	Contacts 🗢		
Program	Information	Search Stu Application			-			
Module	: Student	New Stude	nt Applicati	on				
	Selected: 22	Renew Stu Application		ogram 🗘				
046326 - 0	Clermont Nort	Task Mana	gement					

11.0 Advanced Student Search Page

Click *search* in the bottom left to obtain a list of all participants for the Application Period selected. To view a participant's application, click on the *Details* button located to the far right of the existing participant application.



*Note – select the correct Application Period in the dropdown box.



The existing Student Information page provides the general information initially entered for the participant. To edit the participant's information, click on the Edit Icon (pencil tool) located at the top of each section. Other participant application pages can be accessed by clicking on the desired tab located along the top of the page. If you have questions or need to edit the information on these pages, please follow the steps and guidance provided for the page provided above.

Invoicing

This guide provides instructions on the payment process for the Competency-Based Diploma Pilot or Program.

Payment for Competency-Based Diploma Pilot Program





\$5,000 maximum per participant per year

- \$790 for each credit passed
 - \$400 per content assessment
 - \$400 upon attainment of a minimum accumulating score of 18 points on end-of-course assessments
 - \$400 upon attainment of a minimum of 4 points on English language arts end-of-courseassessments or a minimum score of 400 points on the reading Ohio Graduation Test and 400 points on the writing Ohio Graduation Test
 - \$400 upon attainment of a minimum of 4 points on mathematics end-of-course assessments or a minimum score of 400 points on the mathematics Ohio Graduation Test
 - \$400 upon attainment of a minimum accumulating score of 6 points on science and social studies end-of-course assessments or a minimum score of 400 points on each of the science or social studies Ohio Graduation Test
- Students who entered 9th grade in 2014 and beyond must participate in end-of-course assessments as opposed to the Ohio Graduation Test
- The \$800 for successfully passing remaining credits and/or assessments and earning a high school diploma will no longer be included for FY2022 and beyond.

Bucket details are available on Status/Flags tab at any status of provider application. After viewing payment options and bucket funding details, submit invoice.

C Previsus Provider 18 of 40		Period: Adult Learner FY 2021 Type: Renewal Applications Status: Approved	Next 3 Back to Search
General Personnel Application Participating Buildings Docs Status	s / Flags Comments / History		
	-		Provider Bucket Details
Available Flage Fatal-Not Renewing Fatal-Renewal on Hold Fatal-Renewal on Hold	Add Flag 🕥	Applied flags you may remove	Provider Bucket Amount C S81,632.00 Total Provider Awarded Amount Total Left to Award S78,099.74 S3,532.26
			Status
			Current Application Status Approved
		Applied flags you may not remove	Update Status To: Withdrawn or Terminated

A participant's application must be Accepted to create an invoice. Once the application is Awarded, the HSD Nominator Accepts the application on the participant's behalf. Please confirm that the participant still wants to engage in the program. To accept, open the participant's application. Click the Status/Flags tab and click Accepted.

Student Email

For a participant to accept invoices, there must be an email address listed on the Student Tab that the participant can access.



tudent pplication Past Credits Earned	Credit Recovery Plan Assessment Docs Assuran	ces Status / Flags Comments / History	
Student Information First Name Payton Date of Birth: 06/24/1993 Elimityby Birth Place City: Canton Phone Number: 234-804-9793 Address	Middle Name: Corene Mother's Malden Last Name: Frazier Native Language: English Bittin Place Salte: Ohio Phone Number Type: Cell Phone Number	Last Name: Coleman: Suffic: Gender: Female Last 4 Dipts of SSNE 2959 Email: Refresh@Fakemail.com	SSID STATUS Carrent SSID Status Pending SSID Verification Update SSID Status To: No Action Available
Student Home Physical Address 2 defenses Line 1: 4027 South Bivd apt 11 Address Line 2: City: Canton State: Ohio 20: 44718		Student Home Mailing Address 2 Address Line1. 4927 South Elvd apt 11 Address Line2. Chy: Canton State: Chio Zip 44718	

Submitting Invoices for Payment

1. Sign in to OH|ID portal. (https://safe.ode.state.oh.us/portal/)

		An Official Site of Ohio.gov 🛇
⊖OH ID		
Log in to your OH ID accoun	t to access multiple state applications.	
User ID		
FORGOT YOUR USER ID?		
Password		
FORGOT PASSWORD?	8	
	🔒 Log In	
LO	GIN HELP FIRST TIME USER?	
By logging in to and using this website, I agree to the Terms of Use and Legal Terms and Conditions computer systems may be accessed	of this website and to any other terms and conditions that may be set and used only for official state business by authorized personnel.	forth on the individual pages of this website. State of Ohio

2. Click the Adult Learner Application tile.

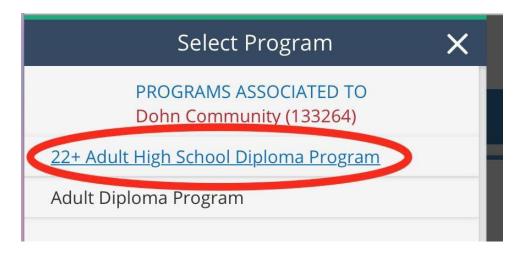
			An Official Site of Ohio.gov 👁
⊖OH ID	SECURITY DEVELOPERS	HELP MANAGE OHJID ACCOUNT	a Q
DASHBOARD SITES & APPLICATIN	ONS SECURITY LEVEL RECENT ACTIVITY	DEVICES	
My Sites & Applic	ations		
A collection of all the sites and applications you ha	ve accessed, using your OH ID account.		
A	I AI [☆]	A	↓ ,
Adult Learner Providers and Students	Department of Education Application Request	Department of Education Profile Setup	Educator Licensure and Records (CORE)
22 - High School Diptome and Adult Diptome Programs Go To Site 🗹	Request access to Education applications Go To Site 🗹	Crease a profile with of the Department Go To Site 🚰	Apply, renew, and maintain licenses Go To Sitte 🗗
Other Sites & Applications	under OH ID		

3. The Dashboard will appear. Click Select Program in the top left.



Ohio Department of Education	Welcome : Staci T 133264 - Dohn Cor	- J LC	Session Timeout:00:59:39
Select Program	Adult Dasht	board	👤 YouTube
ANNOUNCEMENTS	•	TASKS IN OPE	IN STATUS
		MY OPEN TASKS	GROUP TASKS

4. In the window that appears on the left, click on 22+ High School Diploma Program.



5. Hover over the Student Tab located in the top left of the page. Select Search Student Application.

Welcome : Staci Trittschuh 133264 - Dohn Community Session Timeout:00:58:31
STUDENT - FINANCE - COMPLIANCE - USER MANUALS AND FORMS CONTACTS -
» Search Student Application
» New Student Application
» Renew Student Application
» Task Management

6. There are multiple ways to locate a participant's application to create an invoice. Make sure Application Period is accurate.



- a. On the Student Search Page, type the participant's first and last name. Click Search.
- b. On the Student Search Page, enter the *Application ID* or *Student ID*. Click Search.
- c. On the Student Search Page, click *Search* to obtain a complete participant list.

NOTE: The list can be filtered by using the Application Status section located to the right.

		AD	VANCED ST	UDENT SEAR	CH PAGE	
BASIC SEARCH SSI	D SEARCH	ASSESSMENT SEARCH				
APPLICATION ID:		APPLICA	TION PERIOD:	Adult Learner FY		APPLICATION STATUS:
STUDENT ID:			CATION TYPE:	All ᅌ		Accepted Awarded Correction Needed
SSID:		CURRENT G	RADE LEVEL:	All	0	Declined Eligible
FIRST NAME:		PRC	VIDER NAME:	Dohn Community		Not Eligible Requirements Passed
LAST NAME:		Р	ROVIDER IRN:	133264	SHOW ONLY MY STUDENTS	Resubmitted
DOB:		DIS	STRICT NAME:			Review Completed Started
DATE SUBMITTED:		Ĩ	DISTRICT IRN:			Submitted
HAS FATAL FLAG(S):	All	0	SORT ORDER:	Date Started, Stat	us, Name 📀	
Search						

7. Open a participant application by clicking the Details button located to the far right.

Basic Search - 1 result(s) returned.

NAME	GRADE	APP ID	PROGRAM PERIOD	STUDENT	PRIMARY PROVIDER IRN	PRIMARY PROVIDER	DISTRICT IRN	DISTRICT OF RESIDENCE	APP STATUS	DATE SUBMITTED	APP TYPE	OETAIL
Jones, Anthony Howard	**	393176	Adult Learner FY	213146	133264	Dohn Community	043851	Deer Park Community City	Accepted	2/20/2018	New	Ø

8. Click on View Finance Details.

PREVIOUS	2 of 60			ID: 899894 Name: Laszlo Marie Bauer	Period: Adult Learner FY 2022 Type	e: Renewal Status: Accepted		NEX > View Finance Back student search
tudent	Application Past Crec	its Earned Credit Recovery Plan Ass	essment Docs Assur	nces Status / Flags Comments / History]			
Student I	nformation Ø						SSID STATUS	
First Name:	Laszlo	Middle Name: Marie Mother's Maiden Last N	me Burkhammar	Last Name: Bauer Su Gender: Female	Toc:		Current SSID Status Pending SSID Verification	
Ethnicity: WI	hite, Non-Hispanic Dity: Akron	Native Language: Englis Birth Place State: Ohio		Last 4 Digits of SSN#: 3 SSID:	991		Update SSID Status To: No Action Available	
Phone Num	ber: 330-785-5643	Phone Number Type: Ce	Il Phone Number	Email: Refresh@Faker	nail.com			
Address								
Student H	ome Physical Address	Ø		Student Home Mailing Address Ø				
Address Lin	e1: 340 Edith Ave.			Address Line1: 340 Edith Ave.				
Address Lin	e2:			Address Line2:				
City: Akron				City: Akron				
State: Ohio				State: Ohio				
Address Line City: Akron State: Ohio Zip: 44312	e2:			City: Akron				

9. The system directs you to the Attendance Tab. Enter the participant's attendance hours for each month. Click the Save icon.



5 ------7; (0070102153, 0072707(0)8738 (0070102153, 0072707(0)8738

	ACCOUNT SUMMARY	PAYMENT	FINANCE DOCS	FINANCE	COMMENTS			
School Name	Provider IRN	En	rollment Start Date		Enrollmen	t End Date	Total Hours	Detail
Dohn Community	133264		02/20/2018		06/30	/2018	30	Ø
Month/Year	Hours			Action		COMMENTS:		
July 2017								
Aug 2017								
Sept 2017								
Oct 2017								
Nov 2017								
Dec 2017								
Jan 2018								
Feb 2018	10				Ø			
March 2018	10				Ø			
April 2018	10							
May 2018								
June 2018								
otal for Year	30							

To edit hours, click the pencil icon, correct the hours, and click Save.

NOTE: If needed, you can add comments by clicking on the Add Comment button in the lower right.

10. Click on the *Finance Docs* Tab. Click *Course Transcript* on the far left.

ATTENDANCE INVOICE	ACCOUNT SUMMARY	PAYMENT FINANCE D		IENTS			
DOCUMENTS:		OCUMENTS ON FILE:		□ *- <i>v</i>	iew Document	🗊 - Delete	Document
Course Transprint		NAME	TYPE	DATE	REQUIRED	REVIEW	V D
Course Transcript		Preyor, Lamar 4-27-18.pdf	Course Transcript	4/27/2018 1:29:43 PM	Y		1.
		Preyor, Lamar 4-16-18.pdf	Course Transcript	4/16/2018 3:06:59 PM	Y		D• 🗊
		Preyor, Lamar 4-2-18.pdf	Course Transcript	4/8/2018 11:44:09 AM	Y		D• 🗊
		Preyor, Lamar 1-26-18.pdf	Course Transcript	3/7/2018 11:19:30 AM	Y		1.
					R	efresh	Save
				(Select Refresh butto			

The following window will appear. Click *Browse* to locate your document. Click *Open*. (This may be different depending on the browser you are using.)



https://entdocrepqa.o	de. state.oh.us //H	ome/Upload?key=3A8Ag8C)HWqGUjta%2bG	6XaH021	vlYqq48ii	aWrf
Upload for Co	urse Transc	ript:				
Only the followin	a file extension	s are accepted:				
.doc, .	• contraction of the second second	.jpeg, .mht, .pdf, .txt, .xls	, .xlsx, .xlsm, .x	dsb, .pr	ng, .zip	
and the contraction of the second	• contraction of the second second	Service and the service of the servi	, .xlsx, .xlsm, .x	dsb, .pr Brow		
.doc, . File Location:	• contraction of the second second	.jpeg, .mht, .pdf, .txt, .xls	, .xlsx, .xlsm, .x	Brow		

Once the file location populates, click Upload.

		%2bG6XaH02MYqq48ia	
Upload for Co	ourse Transcript:		
Only the following	ng file extensions are accepted:		
.doc,	.docx, .gif, .jpg, .jpeg, .mht, .pdf, .txt, .xls , .xlsx, .xl	sm, .xlsb, .png, .zip	
File Location: (Max Size 5M)	C:\Users\10156725\Desktop\test.docx	Browse	
File Name	(optional - Default will be the	a filename)	

After uploading the document, click Refresh in the bottom right.

OOCUMENTS ON FILE:		□ • - <i>V</i>	iew Document	📋 - Delete	Documer
NAME	TYPE	DATE	REQUIRED	REVIEW	V D
Preyor, Lamar 4-27-18.pdf	Course Transcript	4/27/2018 1:29:43 PM	Y		1
Preyor, Lamar 4-16-18.pdf	Course Transcript	4/16/2018 3:06:59 PM	Y		D• 1
Preyor, Lamar 4-2-18.pdf	Course Transcript	4/8/2018 11:44:09 AM	Y		1
Preyor, Lamar 1-26-18.pdf	Course Transcript	3/7/2018 11:19:30 AM	Y	D	[+ 1
				efresh	Save

11. Click the Invoice Tab to add a new invoice when a participant has passed one or more



Click Add New Invoice.

ng Student:	1 of 1												
TENDANCI		AC	COUNT SUM	MARY	PAYMENT	FINANCE	DOCS	FINANCE CO	OMMENTS				
Invoice Information Scholarship: 2/20/2018 - 6/30/2018 Total Allocated: \$5,000.00 Total Invoiced: \$3,214.26 Total Paid: (\$3,214.26) Total Remaining: \$1,785.74 4 invoice(s) returned. Total Requested: \$3,214.26, Total Approved: \$3,214.26 indicates Invoice is an Adjustment													
												and the second se	
IVOICE UMBER	NAME	APP ID	PROGRAM	PROVIDER IRN	PROVIDER	STATUS	BILLING	DATE SUBMITTED	REQUESTED	ODE APPROVED AMOUNT	TO BE PAID (OR) REFUNDED	GOTO	PRINT
	Jones, Anthony Howard	APP ID 393176			Dohn Community	Invoice Accepted				APPROVED	(OR)	GOTO	PRIN
UMBER	Jones, Anthony		PERIOD Adult Learner FY	IRN	Dohn	Invoice	CYCLE FY	SUBMITTED	AMOUNT	APPROVED AMOUNT	(OR) REFUNDED		
UMBER 846164	Jones, Anthony Howard Jones, Anthony	393176	PERIOD Adult Learner FY 2018 Adult Learner FY	IRN 133264	Dohn Community Dohn	Invoice Accepted Invoice	FY 2018 FY	SUBMITTED 3/7/2018	AMOUNT \$1,428.56	APPROVED AMOUNT \$1,428.56	(OR) REFUNDED \$1,428.56	•	9

12. The Invoice Window will open. Click Add Course.

voice	x
voice Number: 0	Provider: Dohn Community
nrollment: 2/20/2018 - 6/30/2018	Student Name: Jones, Anthony Howard
Invoice 📕	
Course Type	Course Name Start Date End Date Credits Amount Lunper in
	Add Course
Comments 👔 🐻	CLICK HERE TO VIEW DETAILS
	Amount to be paid by ODE for this Invoice \$0.00
	NOTE: ** Total amount requested this Invoice is less than the total available amount
	amount
Add Comment	



13. Another window will open. Enter the information for the following items: Course type, Course Name, Start Date, End Date, and Credits.

Int
Int
Cancel

14. Once these items are completed, click *Save Course*. NOTE: the system automatically fills in the Amount.

			Amount to h	e paid by ODE for this Inv		\$0.00
	Save Course					×
	Course Type	Course Name	Start Date	End Date	Credits	Amount
	Elective Requirements ᅌ	English Language Arts ᅌ	02/23/2018	04/20/2018	1.0 ᅌ 7	14.28
-						
d					Save	Course Cancel
L						

15. Continue Adding courses (steps 11-14) until all completed courses/assessments, which have not been invoiced for, are included. In this example, the invoice includes 1.5 content and 2.0 elective credits for a total of \$1,785.74.

NOTE: The Other Social Studies is only for \$0.04 because this invoice combined with previous invoices has maxed the participant's eligibility for the year. (Max per year is \$5,000).

olice Number: 0 oliment: 2/20/2018 - 6/30/2018			Provider: Do Student Nar			ard
nvoice 👼						
Course Type	Course Name	Start Date	End Date	Credits	Amount	Edit Dele
Elective Requirements	English Language Arts	2/23/2018	4/20/2018	1.0	714.28	1
Elective Requirements	Mathematics	3/5/2018	5/29/2018	1.0	714.28	1
Content Requirements	American Government	3/12/2018	5/2/2018	0.5	357.14	1
Content Requirements	Other Social Studies	3/12/2018	5/2/2018	1.0	0.04	1
	Tota	al amount red	uested in thi	s Invoice:	\$1,785.74	
						Add Course
				CLICK	HERE TO V	IEW DETAI
Comments 👔 📥	Amount to b	e paid by ODI	E for this Invoi	се		\$1,785.7

16. To Submit the invoice, you may need to scroll to the bottom of the invoice window.

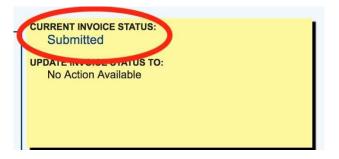




NOTE: A course transcript is required to submit an invoice. Each invoice requires a transcript. If a transcript has not been already uploaded, you will receive the error message shown below. Click *OK*. Make sure to save the invoice before closing it to upload the transcript.

	×	
าเ	Course transcript is required to submit the Invoice.	:
I.		
	Ok	
L		

17. Clicking *Submit* changes the Invoice Status to Submitted.



18. Participants receive an email informing them that an invoice was submitted for their approval. Please explain to participants that they are NOT receiving a bill; the action of accepting the invoice allows the Department of Education to pay for the coursework the participant completed.

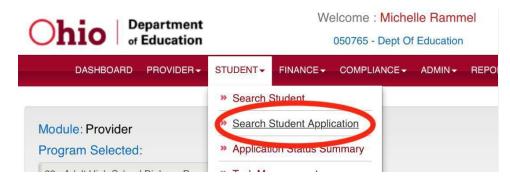
Reviewing Existing Invoices

There are three ways to access an existing invoice:



1. Search Student Application

Hover over Student Menu at the top. Select Search Student Application.



2. Finance Search

Hover over the Finance Menu at the top. Select *Finance Search*.

Ohio Department of Education	Welcome : Michelle Rammel → LOGOUT
DASHBOARD PROVIDER - STUDENT -	FINANCE - COMPLIANCE - ADMIN - REPORT USER MANUALS AND FOR
	* Finance Search
Module: Provider	» Invoice Search
Program Selected:	» Payment Search

3. Invoice Search

Hover over the Finance Menu at the top. Select Invoice Search.

Ohio Department of Education	Welcome : Michelle Rammel 050765 - Dept Of Education					
DASHBOARD PROVIDER - STUDENT	FINANCE - COMPLIANCE - ADMIN - REPORT U					
	» Finance Search					
Module: Provider	» Invoice Search					
Program Selected:	» Payment Search					

After selecting one of the three methods listed above, enter the participant's APP ID *or* first and last name. Be sure the correct Application Period is selected in the dropdown box.



Select the participant by clicking on the Details icon on the far right.

Basic Search - 1 result(s) returned.										0		
NAME	GRADE	APP ID	PROGRAM PERIOD	STUDENT	PRIMARY PROVIDER IRN	PRIMARY PROVIDER	DISTRICT IRN	DISTRICT OF RESIDENCE		DATE SUBMITTED	APP TYPE	DETAILS
Chen, Benjamin Marie	**	480738	Adult Learner FY	169985	063297	Lorain Co Community College	043943	Elyria City Schools	Accepted	6/1/2018	Renew	9

Click on View Finance Details.

.

-	ID: 4807	738 Nam	e: Benjamin Marie Che	en Perioo	d: Adult Learner F	- 1 A A A A A A A A A A A A A A A A A A	Type: Renewal itus: Accepted	View Finance Detail
iewing 2	of 7 Tas	k: Accept /R	Reject invoice - Application I	D: 480738, Invoice Number: 8	71106, Student Na	me: Benja	min Marie Chen	
STUDE		LICATION	PAST CREDITS EARNED	CREDIT RECOVERY PLAN	ASSESSMENT	DOCS	STATUS / FLAGS	COMMENTS / HISTORY

Under the Invoice Tab, any invoice that has been processed for the participant can be viewed.

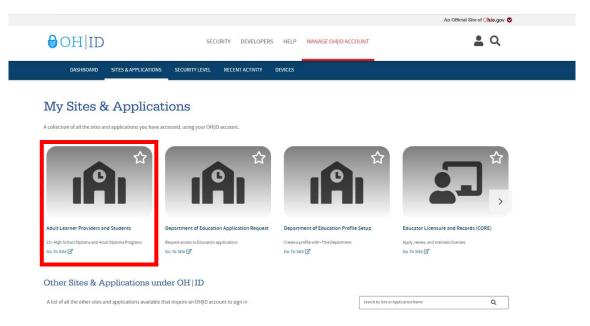
ID: 480738	lame: Benjamin Marie	Period: Adult Learner FY Type: Renewal Applica Status: Acce				
Viewing Student: 1 of 1						
ATTENDANCE	_	PAYMENT	FINANCE DOCS	FINANCE COMMENTS		
Invoice Information	*					

Student Accept an Invoice

1. Access the OHID account https://safe.ode.state.oh.us/portal

	An Official Site of Ohio.gov 🛇
⊖OH ID	
Log in to your OH ID account to access multiple state applications.	
User ID	
FORGOT YOUR USER ID?	
Password	
FORGOT PASSWORD?	
LOGIN HELP FIRST TIME USER?	
By logging in to and using this website, I agree to the Terms of Use and Legal Terms and Conditions of this website and to any other terms and conditions that may be se computer systems may be accessed and used only for official state business by authorized personnel.	t forth on the individual pages of this website. State of Ohio

2. Select Adult Learner Application tile.





3. The Adult Student Dashboard appears.

Select Program Adult Student Dashboard	l i i i i i i i i i i i i i i i i i i i	
Student Details	~	
Task List	^	ſ
SHOW 5 CHTRIES	SEARCH:	
TASK TITLE	START STATUS	
Accept /Reject invoice - Application ID: 480738, Invoice Number: 871107, Student Name: Benjamin Marie Chen	06/01/2018 Open OPROCEED	-

4. Locate the Task List. There will be one or more invoices waiting for your (the adult participant) approval. Click *Proceed*.

Select Program Adult Student Dashboard				
Student Details				~
				~
SHOW 5 CENTRIES	SEARCH:			
TASK TITLE	START DATE	STATUS		
Accept /Reject invoice - Application ID: 480738, Invoice Number: 871107, Student Name: Benjamin Marie Chen	06/01/2018	Open	ØPROCEED	
Accept /Reject invoice - Application ID: 480738, Invoice Number: 871106, Student Name:	06/01/2019	Open	OPROCEED	

5. A window will open.

Enrollment: 7/1/2018 - 6/30/2019 Student Name: Chen, Benjamin Marie	Invoice Number: 871106			Provider: Lo	orain Co Cor	mmunity Colle	ege
Course Type Course Name Start Date End Date Credits Amount Edit	Enrollment: 7/1/2018 - 6/30/2019			Student Nar	me: Chen, B	Benjamin Mari	e
	Invoice 👼						
Content Requirements Other Social Studies 7/1/2018 7/12/2018 0.5 357.14			Start Data	End Date	Credite	Amount	Edit Delet
	Course Type	Course Name	Start Date	Lilu Date	Greatis	Amound	Landberer
Total amount requested in this Invoice: \$357.14							Luit Doioi
		Other Social Studies	7/1/2018	7/12/2018	0.5	357.14	
CLICK HERE TO VIEW DET	Content Requirements	Other Social Studies	7/1/2018	7/12/2018	0.5 is Invoice:	357.14 \$357.14	



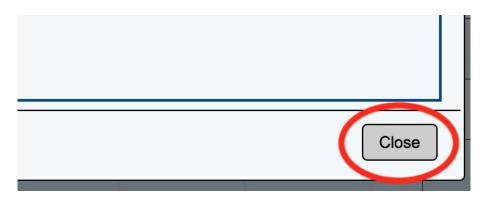
NOTE: If you Reject the invoice, the provider is not paid for your completed work and you will notreceive your High School Diploma.

٦	CURRENT INVOICE STATUS: Submitted	
<	UPDATE INVOICE STATUS TO Accept Invoice	
	Invoice Reject	

7. The Current Invoice Status changes to *Invoice Accepted*.



8. Click Close at the bottom. (You may have to scroll down further.)



9. Lastly, sign out of your OH|ID account. This is located at the top right of the screen.

Ohio	.gov	Departr of Educa	nent ation		<u>Welcome benjamin chen</u> [Sign Out] Printe, m.dly Version Session تربیر out:00:59:43
Dashboard	Student 🗢	Finance 🗢	User Manuals and Forms	Contacts 🗢	QA
Program	Information]			



Contact Information

For questions regarding the Competency-Based Diploma Pilot Program, please contact:

Ashley Kerr

Education Program Specialist Office of Career-Technical Education 614-387-2199 ashley.kerr@education.ohio.gov

The Department's <u>Notice of Non-Discrimination</u> applies to all programs and activities.



Application Template

	ed Diploma Pilot APPLICANT INFORM	IATION -
First Name:	Middle:	Last:
Date of Birth:	Phone:	Phone Type:
Physical Street Address:		
City:	State:	ZIP Code:
Mailing Address (if different than above):		
City:	State:	ZIP Code:
School District of Residence:	County:	Date Residency Began:
Birth Place City:	Birth Place State:	Mother's Maiden Last Name:
Email:	Gender:	SSID:
Native Language:	Ethnicity:	Last 4 Digits of SSN#:
U.S. Citizen: Yes 🗌 No 🗌	U. S. Veteran: Yes 🔲 No 🗌	Last Name on Birth Certificate:
Applicant Educati	onal Background - To be Completed by A	oplicant
Year Student Entered 9th Grade:	Highest Grade Completed:	
Last Academic Year Completed:	Name of Last School Attended:	
STUDENT SU	JCCESS PLAN - To be completed by Provid	er
Secondary Provider Name:		
Secondary Provider IRN:	Initial Counseling/Associated Services Completed	(check all that apply):
Pre-Assessment Name:	OhioMeansJobs Registration	Digital Literacy Training
Check one:	Career Inventory	Create Resume
≥ 9th Grade 🗌	□ Job Outlook Data/In-Demand Jobs	Benefits Access
≤ 9th Grade □	Postsecondary Opportunities	Other Support Services
Credential/Certificate Program Name:	Identify Disability (If applicable)	□ Other



Work Credit Form



Education.Ohio.gov

Mike DeWine, Governor Jon Husted, Lt. Governor Stephen D. Dackin, Director

Provider name:

Student ID Number:

Work/Life Experience Credit: Per rule 3301-45-07 Competency-based instructional programs and credit for prior learning, section C:

(C) Providers must consider prior learning experiences of the adult learner and award appropriate credit using educational options prior to enrolling the student in the program.

Hours Worked - Credits Granted:

120 contact hours = 1 Career Technical Education (CTE) Credit Maximum of number of credits can be earned: (credits are based on Graduation Requirements when the applicant entered the 9th Grade)

Please detail educational options related to CTE:

i.e.: Educational options can include the following: -Work Experience and/or -Life Experience

Student Signature

Date

HSD Provider Signature Date

25 South Front Street Columbus, Ohio 43215 U.S.A. education.ohio.gov 877 | 644 6338 For people who are deaf or hard of hearing, please call Relay Ohio first at 711.

The State of Ohio is an Equal Opportunity Employer and Provider of ADA Services



Credit Review Form 1963 - 1989

Name		App ID	Provider	Year Enter 9 th grade	Credits Required	Credits Earned	Credits Needed
Proof Address	ID	Transcript	_ IEP	Proof CTE credit	(18)	Larneu	Neeueu
ENGLISH					3		
МАТН					2		
SOCIAL STUDIES	Am History (1)	Am Govt (1)			2		
SCIENCE					1		
PE/HEALTH	PE (1/2)	Health (1/2)			1		
	ELA	Math	SS	S	0		
ELECTIVES (Must complete 3 units in another	Foreign Lang	Visual/Performing Arts	Business	Technology	9		
subject besides ELA)	Career Tech	Industrial Arts					

Credit Review Form 1990 – 2001

Name		_ App ID	Provider	Year Enter 9 th grade	Credits	Credits	Credits
Proof Address	ID	Transcript	IEP	Proof CTE credit	Required (18)	Earned	Needed
ENGLISH					3		
МАТН					2		
SOCIAL STUDIES	Am History (1)	Am Govt (1)			2		
SCIENCE					1		
PE/HEALTH	PE (1/2)	Health (1/2)			1		
	ELA	Math	SS	S	0		
ELECTIVES (Must complete 3	Foreign Lang	Visual/Performing Arts	Business	Technology	9		
units in another subject besides ELA)	Career Tech	Industrial Arts					
ASSESSMENTS	Reading	Math	Writing	Science *	Social Studie	!S	

*NOTE: Science required for those who entered 9th grade for first time in 1997 and beyond

Credit Review Form 2002 – 2003

Name		App I	D	Provider		Year Enter 9 th grade	Credits	Credits	Credits Needed
Proof Address	ID	Trans	cript	IEP		Proof CTE credit	Required (20)	Earned	Needed
ENGLISH							4		
МАТН							3		
SOCIAL STUDIES	Am History (1/2)	Am G	ovt (1/2)				3		
SCIENCE	Biology	Physi	cal Science *				2		
PE/HEALTH	PE (1/2)	Healt	h (1/2)				1		
ELECTIVES	Bus/Tech		Fine Arts		Forei	gn Lang	7		
(Must include 1 credit of business/tech, fine arts and/or foreign	ELA		Math		SS				
language)	Science		Career Tech		Indus	strial Arts			
ASSESSMENTS	Reading	Math		Writing		Science **	Social Studi	es	

*NOTE: Physical Science includes: Physical Science, Chemistry, Physics, Earth Space Science, Geology **NOTE: Science required for those who entered 9th grade for first time in 1997 and beyond

Credit Review Form 2004 – 2009

Name		App II	D	Provider		Year Enter 9 th grade	Credits	Credits Earned	Credits Needed
Proof Address	ID	Trans	cript	IEP		Proof CTE credit	Required (20)	Larneu	Needed
ENGLISH							4		
МАТН							3		
SOCIAL STUDIES	Am History (1/2)	Am G	ovt (1/2)				3		
SCIENCE	Biology	Physic	cal Science *				3		
PE/HEALTH	PE (1/2)	Healt	h (1/2)				1		
	Bus/Tech		Fine Arts	Foreign Lang		gn Lang			
ELECTIVES							6		
(Must include 1 credit of business/tech, fine	ELA		Math		SS				
arts and/or foreign language)	Science		Career Tech		Indus	strial Arts			
ASSESSMENTS	Reading	Math		Writing		Science **	Social Studi	es	

*NOTE: Physical Science includes: Physical Science, Chemistry, Physics, Earth Space Science, Geology **NOTE: Science required for those who entered 9th grade for first time in 1997 and beyond)

Credit Review Form 2010 – 2013

Name		App ID	Provider	Year Enter 9 th grade	Credits	Credits	Credits
Proof Address	ID	Transcript	IEP	Proof CTE credit	Required (20)	Earned	Needed
ENGLISH					4		
MATH (incl. Alg 2 or equiv.)					4		
SOCIAL STUDIES	Am History (1/2)	Am Govt (1/2)			3		
SCIENCE	Physical Science *	Life Science **	Adv Study		3		
PE/HEALTH	PE (1/2)	Health (1/2)			1		
CHECK OFF ONLY:	Fine Arts (2 semeste (grades 7-12)	ers)	Economics and F	Financial Literacy			
ELECTIVES (Must include 1	Foreign Lang	Fine Arts	Business	Career tech	Б		
credit of business/tech, fine arts and/or foreign language)	FCS	Technology	Ag Ed	JROTC	- 5		
ASSESSMENTS	Reading	Math	Writing	Science ***	Social Studi	es	

*NOTE: Physical Science includes: Physical Science, Chemistry, Physics, Earth Space Science, Geology **NOTE: Life Science includes: Biology, Anatomy & Physiology

***NOTE: Science required for those who entered 9th grade for first time in 1997 and beyond

Credit Review Form 2014 – Present

Name		App ID		ider	Year Enter 9 th grade				
Proof Address	ID	Transcript	IEP _	Proof CTE credit			Credits Required (20)	Credits Earned	Credits Needed
ENGLISH							4		
MATH (incl. Alg 2 or equiv.)							4		
SOCIAL STUDIES	Am History (1/2)	Am Govt (1/2)					3		
SCIENCE	Physical Science *	Life Science **	Adv Study				3		
PE/HEALTH	PE (1/2)	Health (1/2)					1		
ELECTIVES (Must include 1 credit of business/tech, fine arts and/or foreign language)	Foreign Lang	Fine Arts	Busii	ness	Career tech				
	FCS	Technology	Ag E	d	JROTC	5			
CHECK OFF ONLY:	Fine Arts (2 semesters) (grades 7-12)				Economics and Financial Literacy				
End of Course Exams	ELA (4pts between ELA 1 and ELA 2) ELA 1 ELA 2	Math (4pts between Alg and Geom): Alg I Geom	om):		l Studies (6pts total between , and Bio): Govt Hist —	Earned at least 18 of 32 possible points on the 7 end of course exams of 32			
ACT/SAT	ACT: English (18 or above) Reading (22 or above)	Math (22 or above)		SAT (prior to March 2016): Writing (430 or above) Reading (450 or above) Math (520 or above)		SAT (March 2016 and later): EBRW (450 or above) Math (530 or above)			

*NOTE: Physical Science includes: Physical Science, Chemistry, Physics, Earth Space Science, Geology

**NOTE: Life Science includes: Biology, Anatomy & Physiology