



# Non-Grace Credit Form

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of course: \_\_\_\_\_

School year class was taken: \_\_\_\_\_

Credit amount for this class: circle one 1 .5 .25

1 <sup>st</sup> quarter	2 <sup>nd</sup> quarter	3 <sup>rd</sup> quarter	4 <sup>th</sup> quarter	Final Grade

Number of Hours student was involved in this course \_\_\_\_\_

Administrator signature: \_\_\_\_\_

**By signing, Administrator verifies that all information on this form is true and valid.**

Curriculum: \_\_\_\_\_

Book(s) used: \_\_\_\_\_

Course description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**By signing, parent verifies that all information entered on this form is true and valid.**

Date: \_\_\_\_\_ Parent Signature: \_\_\_\_\_