Student’s Full Name: __________________________

Date of Birth: _______ / _______ / _______

Parent Notice: Please note this form must be completed if your student is seeking enrollment, or has previously enrolled, with GCA and has submitted an incomplete transcript.

STATEMENT ACKNOWLEDGING MISSING ATTENDANCE

Please notate missing Semester(s)/School Year(s) below:

Grade Level: 9          School Year: ____________          Semester(s): ____________
                       Date

Grade Level: 10         School Year: ____________          Semester(s): ____________
                       Date

Grade Level: 11         School Year: ____________          Semester(s): ____________
                       Date

Grade Level: 12         School Year: ____________          Semester(s): ____________
                       Date

I, ______________________, hereby acknowledge that my child ______________________

Parent/Legal Guardian (Please Print)          Student’s Full Name (Please Print)

has not been in attendance because ____________________________________________

(Reason for missing semester(s)/school year(s))

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

I have read and understand that my signature below acknowledges that my student has inconsistencies in his or her academic records, and my student will be placed in the appropriate grade level and courses based on their most recent transcript provided and credits earned.

Parent/Legal Guardian’s Signature          Date