



WOODLANDS ACADEMY
OF THE SACRED HEART

Summer School Approval Form

Students must complete this form before registering for a summer school class at any institution other than Woodlands Academy. Only courses receiving pre-approval will receive credit.

Name: _____ **Graduation Year:** _____

Course Title: _____

Institution: _____

Credit: ___ semester (0.5) ___ full year (1.0)

Please attach a course description.

I understand that I must seek approval before enrolling in this course. I also understand that it is my responsibility to provide Woodlands Academy with an official transcript in order for the grade and credit earned to be posted on my records. I acknowledge that the grade will not be included in my GPA.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

**Please submit this form along with documentation to the Principal for approval.
The principal will communicate a decision. Only upon approval should the student enroll in this course.**

For Office Use Only

Date Received: _____
Principal's Decision: ___ Approved ___ Denied **Date:** _____
Transcript Received: _____