

The Quarry Lane School
APPROVAL TO TAKE SUMMER ACADEMY COURSES
For Current Quarry Lane Students

STUDENT INFORMATION

Student Name: _____ Current Grade Level: _____

Student/Parent Email: _____ Parent Signature: _____

Summer Academy course(s) applying for:

1) _____

2) _____

PREREQUISITE REQUIREMENTS MET

Please enter the name of the course(s) you believe meets the pre-requisite requirement and your grade(s) in the course. Please note that you must maintain the required prerequisite course grade at the end of both semesters to remain enrolled in the summer course.

_____	_____	_____	_____
Course	Teacher Name	1st Semester Grade	Current Grade

_____	_____	_____	_____
Course	Teacher Name	1st Semester Grade	Current Grade

DIRECTOR OF ACADEMICS APPROVAL

Please turn in the form to the Registrar's Office, via email to registrar@quarrylane.org.

- Approved
- Not Approved

Comments: _____

Signature _____ Date _____

You will be notified via email once the form has been completed. It is the student/parent's responsibility to upload this form to the Quarry Lane School Summer Academy Registration Form.