

Honors + High School Credit Courses – Permission Slip

Please Print

I, _____, parent of _____ understand that my child was not recommended by his or her teacher(s) for _____ (class name). I also understand that in requesting to override this decision and request that my child be allowed to take said class, that he or she will not be allowed to transfer out of the class should he or she begin to perform poorly. I recognize that honors level courses necessitate a greater degree of independent work, advanced critical thinking skills, more challenging activities, and heightened expectations regarding homework, writing, and reading proficiency. Knowing all of the above, I would still like to request that my child be able to take _____ (class name).

☐ I have also completed the online [Academic Release Form](#).

I, _____, (student name) understand that once I am enrolled in the above class, I will not be allowed to transfer out of the class.

X _____
Parent/Guardian Signature Date

X _____
Student Signature Date

X _____
School Counselor Signature Date

X _____
Grade Level Administrator Signature Date