

Prior Approval Form

***This form is required if students are taking **summer school** courses (original credit or recovery) outside of Guilford County Schools (GCS)*

Date of Request: _____

GCS School Name: _____

Student Name: _____ Grade: ____ ID #: _____

Parent Name: _____

Address: _____
Street City State Zip Code

Phone: _____ Email Address: _____

Name of course(s) to be taken: _____

Type of course(s) (please circle): **Original Credit** **Credit Recovery**

Name of School or Program Offering Course(s): _____

Address of School or Program Offering Course(s):

Street City State Zip Code

School or Program Representative: _____

Phone: _____

In order to receive credit for the course listed above, the following criteria must be met:

- A description of the course must be supplied to the home school with a completed copy of this form.
- An official final grade must be supplied to the home school upon completion of the course.
- An official documentation of testing, if applicable, must be supplied to the home school upon completion of the course.

Principal's signature: _____ Date: _____

******Prior approval through the Curriculum and Instruction Department is required.**

Approved (signature): _____ Date: _____

Not approved (signature): _____ Date: _____

Reason Not Approved: _____