Great Lakes Adventist Academy

2021 SUMMER SCHOOL REQUEST FORM

Email completed application form to Mrs. Reichert at hreichert@glaa.net by Monday, May 10, 2021.

Student Name:				Grade:
Parent Name Making Request:				
Parent Cell Number & Email:				
Class(es) Requesting to take this Summer 2021: (No more than 2 courses)	1.			
	2.			
Course Description(s): (or attach with application)	1.			
	2.			
Number of Credits Course(s) Worth:	1	2		
Legal Name of School where Course(s) Will be Taken:				
Is the School Accredited:	Yes	No (It mu	st be accredited	for request to be approved.)
Is this an Online School:	Yes	No		
Reason for Requesting Each Summer	School Course(s	8):		
$\frac{\text{AGREEMENT}}{I understand that if the Academic Standards Committee approves my request for summer course(s), I must have all assignments and the final exam(s) finished by the first day of school when I return to GLAA in the Fall. (GLAA Handbook, 14)$				
Student Signature:		Date:		
Parent Signature:		Date:	Date:	
For Office Use Only:				
Date Approved:		Date Denied:		