<div align="center">

Pre-Approved
Grad Classes

</div>

Name:_____   Date Submitted_____

A copy of the registration and /or class descriptions must be attached specifying all of the following information needs:

    A) Name of Course
    B) Course Number
    C) Number of Graduate Credits
    D) Date Course will be taken
    E) Name of Granting Institution

_____   _____
        Teacher Signature   Date

The following are the reasons for not approving this Grad Class. If you do not agree with this class not being approved, you may, after further discussing this with the Superintendent, take this issue to the board.

_____Approved

_____Not Approved

_____   _____
        Superintendent   Date