



<p>Student Name: _____</p> <hr/> <p>School Year: _____</p> <hr/> <p style="text-align: center;"> <input type="checkbox"/> Fall/ 1st semester <input type="checkbox"/> Spring/ 2nd semester </p> <p>Current Date: _____</p> <hr/> <p><i>Parent Signature:</i> _____</p>	<p>FRONTIER CHARTER SCHOOL</p> <p><i>Advisor:</i> _____</p> <hr/> <p>Please note if submitting college course grades, we do need an unofficial copy of the transcript.</p>
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Semester Credit is 90 hours = ½ credit

Yearlong course is 180 hours total = 1 credit.

Work experience = 112 1/2 hours (please submit pay stubs for verification)

For any course taken from another educational institution, you must also attach a grade sheet provided by that institution (UAA, APU, Correspondence, etc.)

Attach logs showing at least 90 hours for review for courses in PE, music, art, volunteer, work experience, etc. Please make sure your log specifies the date, activity, and time spent in the activity.

Please make sure your grades match the course subjects you have for your online ILP's.

Specific Course Title: _____	ASD Course # _____	
Grade Earned: _____ Credit Earned: _____	<input type="checkbox"/> ½ Credit (sem) <input type="checkbox"/> ¼ Credit (quarter-progress only)	
<input type="checkbox"/> Parent Graded <input type="checkbox"/> ASD Graded	<input type="checkbox"/> UAA Graded <input type="checkbox"/> Other _____	
Comments: Date course was finished: _____		
Specific Course Title: _____	ASD Course # _____	
Grade Earned: _____ Credit Earned: _____	<input type="checkbox"/> ½ Credit(sem) <input type="checkbox"/> ¼ Credit (quarter-progress only)	
<input type="checkbox"/> Parent Graded <input type="checkbox"/> ASD Graded	<input type="checkbox"/> UAA Graded <input type="checkbox"/> Other _____	
Comments: Date course was finished: _____		

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<input type="checkbox"/> Parent Graded	<input type="checkbox"/> ASD Graded	<input type="checkbox"/> UAA Graded	<input type="checkbox"/> Other _____
Comments:			
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<input type="checkbox"/> Parent Graded	<input type="checkbox"/> ASD Graded	<input type="checkbox"/> UAA Graded	<input type="checkbox"/> Other _____
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<input type="checkbox"/> Parent Graded	<input type="checkbox"/> ASD Graded	<input type="checkbox"/> UAA Graded	<input type="checkbox"/> Other _____
Comments:			
Date course was finished:			
NOTES/COMMENTS:			