



29:11
ACADEMY

Grade Check Form (DUE: Jan 28th) [High]

Student's Name: _____

Grade: _____

Date: _____

Parent's Signature: _____

Phone: _____

	Subject	Teacher Signature	Percentage /Grade	Missing Assignments?	Behavior Grade (A-F)	Additional Comments
1						
2						
3						
4						
5						
6						
7						
8						

Do you plan to attend college? Yes / No

2 Year College / 4 Year College / Trade School / Enter Workforce

What is your highest achieved ACT/SAT score? _____

Last date taken? _____

What is your personal ACT/SAT goal? _____

OFFICE USE ONLY

GPA _____

Attention Teachers: If you have any questions or comments, call your student's Academic Chair, Tora Chrisentery, at 225-806-8152.

"For I know the Plans I have for you," declares the Lord, "Plans to prosper and not to harm you, plans to give you hope, and a future."