

Date: _____ Cash or Check # _____ Receipt #: _____ Initials: _____
(circle one)

West Laurens High School

Summer Credit Extension June 6th – June 19th

Monday-Friday 8:00 am – 3:00 pm

Lunch will be 12:00 – 12:30

You **will not leave** for lunch, you need to bring your lunch

All classes will be on 500 Hall – **Park in the Senior Parking Lot**

NAME:		DATE:	
HOMEROOM GRADE:		SUBJECT TO BE TAKEN: ALL COURSES MUST BE APPROVED BY THE COUNSELORS!!!!	
PARENTS NAME:	PARENTS CELL PHONE #	YOUR CELL PHONE #	
STREET ADDRESS, CITY & ZIP:	WHEN DID YOU FAIL THIS CLASS? EXAMPLE: 2018 FIRST SEMESTER		
NOTES:			

Counselors Signature: _____

Parents Signature: _____

Students Signature: _____