

COURSE APPROVAL FORM FOR ADVANCEMENT dTHS Summer School 2017



PLEASE COMPLETE FOR SUMMER SCHOOL COURSES TAKEN AT dTHS. If taking a course off campus, use the NON-dTHS Course approval form.

Name of Student: _____ Class of 20_____

I would like to take the following course for:

Enrichment/Advancement Course Title: _____

Course I intend to Advance to next semester: _____

This course is:

a Semester length course

a Full Year course

Please give a brief description explaining why you would like to take this class:

**COMPLETE THE BOX BELOW &, SCAN OR TAKE A PICTURE WITH YOUR CAMERA PHONE
UPLOAD TO THE SUMMER SCHOOL REGISTRATION PORTAL.**

1. Parent Signature: _____ Date: _____

2. Student Signature: _____ Date: _____

3. Department Chair Signature: _____ Date: _____

REMEMBER: All dTHS summer school courses for advancement require permission of the department chair to confirm enrollment. Check with the department chairs or college counseling if you have questions about which course to take.