

This documentation, plus a copy of a graded assessment, is required to receive credit for high school course work completed at home.

<u>All</u> sections of sheet must be filled in. Please make copies as needed.

Mail to: 3636 West Point Circle, Lizella, GA 31052 or Scan to: transcripts@veritasschoolsmg.com

ichool Year:	Semester:
itudent:	Grade Level:
s the student a full-time Veritas Student?   Tyes  T	No
Course Title:	
Course Description: (Copy of the table of contents)	
Text Used:	Publisher:
Feacher/Tutor's Name:	
eacher Credentials - Educational degree:	Major area of study:
Number of Hours spent on Course:	
Fall Semester:	Spring Semester:
First semester numerical grade:	Second semester numerical grade:
*Complete ONE form per course. Attach relevant documents to s	support the numeric grades (a graded assessment such as an exam or a written report). Please
oundle all sheets by grade level.	
*I verify that the above information is true and correct and request	t that this be included in the student's permanent school record.
Feacher/Parent Signature	Date
Parent Email:	