

**TEACHER RECOMMENDATION FORM
FOR COURSE SELECTION
(For student use, if student does not make Pre-requisite)**

This form is required to be considered for admission into **AP, Honors and College Level II and III courses**. The course's instructor and the Assistant Principal of Academics will review all records and will make the final determination regarding the student's suitability for the requested course.

I have read and understand all the objectives and responsibilities included for taking Honors, AP and College Level II courses.

(Student Signature)

(Parent/Guardian Signature)



**CURRENT SUBJECT TEACHER RECOMMENDATION
(Only if student does NOT make Pre-requisite)**

| Course | AP, H, CP II and III | Teacher Signature |
|---------------|-----------------------------|--------------------------|
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(Guidance Office Approval)