

One form to be filled out completely for each part of the course that the student completed.



Course Completion Form (CCF)

_____ Campus Name

2015-2016
School Year

Student ID: _____

Grade Level: _____

Student Last Name: _____

First Name: _____

Course Name: _____ Course Number: _____

Part (select one): 1 2

GRADE EARNED: _____

Date Started: _____

Date Completed: _____

CREDIT EARNED: _____

Year Long Average (YLA): Y N

[YLA is to be used when the student has failed a course in one part and has now earned a grade high enough that when averaged will enable credit to be awarded for the failed part.]

Teacher Name (print): _____

Teacher Signature: _____

Date: _____

Notes & Type of Instruction (virtual, face2face, etc.):

| Gonzalo Garza Independence High School ONLY: | | | |
|---|----------------|------------------|---------|
| GRADES | Block A: _____ | Exam/Port: _____ | |
| | Block B: _____ | Schedule Part 2: | Y N |
| | Block C: _____ | Average: _____ | |

| Registrar Use Only | |
|---------------------------|---------------------------|
| Registrar Name: _____ | Entered in TEAMS on _____ |
| Print Name | date |
| Notes: | |

Send copy to Registrar (Original) - Counselor - Facilitator - Student