

7. Has the applicant failed any subject(s) Yes No

If yes, please fill out the table below:

SUBJECTS FAILED	Grade Level	Grade
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

8. Has the applicant repeated a grade level? Yes No If so, what grade?

Please affix school dry seal here

Date _____

Registrar's signature _____

Registrar's name _____

(Please print)

Email Add: _____