



# Verification of Adequate Progress

PLEASE PRINT ALL INFORMATION

## STUDENT PARENT/GUARDIAN INFORMATION

Name: \_\_\_\_\_ Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

## TRAINING/EDUCATION INFORMATION

School: \_\_\_\_\_ Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

## VOCATIONAL /PROFESSIONAL GOAL

\_\_\_\_\_  
\_\_\_\_\_

Date course began: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Date course ended: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name of Instructor: \_\_\_\_\_ Office Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

**THE SCHOOL INSTRUCTOR OR COUNSELOR MUST COMPLETE THE PORTION BELOW:**

	YES	NO
Student has attended <b>NO LESS THAN 75%</b> of the class.		
Student <b>HAS SHOWN</b> adequate progress.		
Student <b>WILL ADVANCE</b> to the next course/academic term		

Grade for this course (If applicable):    A \_\_\_\_ B \_\_\_\_ C \_\_\_\_ D \_\_\_\_ PASS \_\_\_\_ NO PASS \_\_\_\_

Units completed for this course (If applicable): \_\_\_\_\_

**I CERTIFY UNDER PENALTY OF PERJURY THAT THE CONTENTS OF THE ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.**

\_\_\_\_\_  
Signature of Instructor/School Counselor

\_\_\_\_\_  
Date