

High School Graduation Plan

STUDENT NAME _____ DATE OF BIRTH _____

CURRENT GRADE _____ ANTICIPATED GRADUATION YEAR _____

LSC STUDENT I.D. _____ LSC CAMPUS _____

HIGH SCHOOL _____

9th Grade: School Year _____

10th Grade: School Year _____

Course Description	HS Credits Earned	College Credits Earned
TOTAL CREDITS		

Course Description	HS Credits Earned	College Credits Earned
TOTAL CREDITS		

11th Grade: School year _____

12th Grade: School Year _____

Course Description	HS Credits Earned	College Credits Earned
TOTAL CREDITS		

Course Description	HS Credits Earned	College Credits Earned
TOTAL CREDITS		

Student:	_____	_____	_____
	Printed Name	Signature	Date
Parent:	_____	_____	_____
	Printed Name	Signature	Date
Principal	_____	_____	_____
	Printed Name	Signature	Date
LSC	_____	_____	_____
	Printed Name	Signature	Date
Representative			