SURVIVAL HIGH SCHOOL CHAPERONE TEACHER APPROVAL FORM

STUDENT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOMEROOM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FR. SOPH. JR. (CIRCLE**)**

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| **SUBJECT** | **TEACHER NAME** | **TEACHER SIGNATURE** | **APPROVE/**  **DISAPPROVE +DATE** | **COMMENTS** |
| ENGLISH |  |  |  |  |
| MATHEMATICS |  |  |  |  |
| HISTORY |  |  |  |  |
| SCIENCE |  |  |  |  |
| WORLD LANGUAGE |  |  |  |  |
| ELECTIVE |  |  |  |  |
| ELECTIVE |  |  |  |  |
| OTHER |  |  |  |  |

STUDENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADMINISTRATOR SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_