

**INDEPENDENT SCHOOL DISTRICT #484**  
**112 Kamnic Street, Pierz, MN 56364**

**APPLICATION FOR COLLEGE CREDIT APPROVAL**

In compliance with the provisions of the "Master Contract", I am requesting prior approval for the following course/courses which are to be applied towards a lane change at some future date.

COLLEGE	DEPT.	COURSE NO.	COURSE NAME	CREDITS	GRADE
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

My teaching assignment is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Requested by: \_\_\_\_\_  
Date: \_\_\_\_\_ Approved by: \_\_\_\_\_

cc: Teacher  
Teacher File

NOTE: This form should be completed each quarter, semester or summer school session.