EXHIBIT G

COURSE PLACEMENT WAIVER FORM

Student's Name _____ IBM# _____
Last First

WAIVER

I wish my child to be permitted to enroll in the following course(s) providing there is space available:

_____

_____

_____

Because this is contrary to the advice of the **Holy Cross High School Guidance Counselor** who assisted in the selection process and/or contrary to the student qualifications required for the course, I am assuming full responsibility for this decision.

In addition, I will obtain any necessary tutoring, if the need arises, to assist my child in being successful with this course during the school year. In the event of failure, my child will be required to make up the course in a certified summer school program.

I agree not to request removal from this course at any time.

_____ _____ _____
Date Parent/Guardian's Signature Student's Signature

FOR OFFICE USE ONLY

_____ _____
Date Received Administrator's Signature

Effective Date of Change _____