



TOWNSHIP HIGH SCHOOL DISTRICT 211

Administration Center

UNITED STATES DEPARTMENT OF EDUCATION  
BLUE RIBBON SCHOOLS OF EXCELLENCE

## Summer School Petition to Audit

Student Name \_\_\_\_\_ ID Number \_\_\_\_\_

Course \_\_\_\_\_ Teacher \_\_\_\_\_

Summer School Building \_\_\_\_\_ Home School Building \_\_\_\_\_

By submitting this form with the required signatures, you agree that you will receive an **“Audit”** grade for the above course. This means you will receive **no credit** for the course. ***Students are expected to be in attendance on the last day of class and participate in the final exam.*** For students taking mandatory/invitational academy classes, class performance will be evaluated by teachers regardless of the Audit grade. The grade of **AUD** will appear on your transcript. **This decision is not revocable.**

Student Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Administrator Signature: \_\_\_\_\_

Please turn this in to your instructor upon completion. The teacher should retain this form and turn it in with the final grading materials at the end of the semester.

C: Student  
Teacher  
S.S. Principal

Rev 7/11