

FARMINGTON RIVER REGIONAL SCHOOL DISTRICT

OTIS & SANDISFIELD

555 North Main Road, P.O. Box 679
Otis, MA 01253
Phone (413) 269-4466 ■ Fax (413) 269-7659



COURSE APPROVAL FORM

To be completed prior to enrollment in a course being taken for column movement purposes.

1. Name of Course: _____

2. Course Code / #: _____
3. Where Taken: _____
4. Credit Hours: _____
5. Anticipated Completion Date: _____
6. Level: GRADUATE UNDERGRADUATE
7. Have you ever taken a similar course or a course equivalent to this one? Yes No
8. What other courses are you taking this semester, and where? _____

9. Are you enrolled as a degree candidate? Yes No _____
10. What is your present assignment? _____
11. Are you in a program? Yes No _____

SIGNATURE

DATE

APPROVED NOT APPROVED

SUPERINTENDENT OF SCHOOLS

DATE

IF APPROVED, RETURN THIS FORM WITH COURSE COMPLETION RECORD TO THE SUPERINTENDANT'S OFFICE.