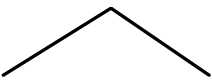


HIGH SCHOOL TRANSCRIPT PERMANENT ACADEMIC RECORD



T.E.A.C.H. Institute & Accrediting Association

10250 Jody Ave. N., Stillwater, MN 55082 (651) 762-5600

NAME OF STUDENT _____

Address _____

School attended 9th Gr:

9th Grade		YEAR		TOTAL INSTRUCTIONAL DAYS	
SUBJECT	COURSE TITLE	GRADE	CREDITS		
Literature					
English					
Mathematics					
Science					
Social Sciences					
Fine Arts					
Bible					
Health					
Phy. Ed.					
Electives:					
TOTAL CREDITS:					

School attended 10th Gr:

10th Grade		YEAR		TOTAL INSTRUCTIONAL DAYS	
SUBJECT	COURSE TITLE	GRADE	CREDITS*		
Literature					
English					
Mathematics					
Science					
Social Sciences					
Fine Arts					
Bible					
Phy. Ed.					
Electives:					
TOTAL CREDITS:					

School attended 11th Gr:

11th Grade		YEAR		TOTAL INSTRUCTIONAL DAYS	
SUBJECT	COURSE TITLE	GRADE	CREDITS		
Literature					
English					
Mathematics					
Science					
Social Sciences					
Fine Arts					
Bible					
Electives:					
TOTAL CREDITS:					

School attended 12th Gr:

12th Grade		YEAR		TOTAL INSTRUCTIONAL DAYS	
SUBJECT	COURSE TITLE	GRADE	CREDITS*		
Literature					
English					
Mathematics					
Science					
Social Sciences					
Fine Arts					
Bible					
Electives:					
TOTAL CREDITS:					

(*One credit is equal to 120 hours of course study or completion of a one year course)

Official Signature: _____

Graduation Date: _____

GPA: _____