

Accelerated High School Recommendation Form

Student Name:	High School:		
Coastal Student Number (A#):	Term of Enroll		
Cumulative Unweighted GPA:	Year of Enrolli		
CA Course(s) Requested	Delivery (Online or On Campus)	Notes/Other	
Student and Parent Section:		Acknowledgemen	
Student Name (printed)	Student Signature	 Date	
Parent Name (printed)	Parent Signature	Date Date	
Administrator Section:		Acknowledgement/Approval	
minimum cumulative unweighted 3.0		dents, including completion of 10th grade and a e admitted under the conditions of the Alabama nscript is being provided.	
maturity. It is the responsibility of		monstrated both academic readiness and social is determination. Coastal Alabama Community cial maturity.	
Administrator Name (printed)	Title of A	Administrator (printed)	
Administrator Signature	Data		

It is the official policy of the Alabama Community College System and Coastal Alabama Community College that no person shall be discriminated against on the basis of any impermissible criterion or characteristic including, without limitation, race, color, national origin, religion, marital status, disability, sex, age or any other protected class as defined by federal and state law.