Family Learning Academy Acceleration Form

If you are planning to accelerate your child through a grade, please fill out this form and return it to your team captain.

Student's Name _____

Student's Age _____

Student's Current Grade _____

Acceleration Grade _____

Briefly state your reasons for the planned acceleration – how you believe that it will benefit your child. Also, explain how you plan to accomplish the acceleration.

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Parent's Signature_____Date_____

Team Captain's Signature_____Date_____