



Professional School Counselor Form
PGCPS Registered Apprenticeship Program

Dear Professional School Counselor:

Please complete the following form prior to signing a student's application for the Construction Trades Registered Apprenticeship Program. The student should attach this form to their application with your signature.

Student Name: _____

Student ID Number: _____

School: _____

Has the student taken ***and passed*** the state required tests for the following subjects?

Algebra _____ YES _____ NO

Biology _____ YES _____ NO

English 10 _____ YES _____ NO

Local, State, National Government _____ YES _____ NO

What is the student's current cumulative GPA as of the end of the semester? _____

At this time, if the student completes and passes their current courses, will the student be eligible for an early release schedule their senior year? _____ YES _____ NO

If no, what are the barriers to their having an early release schedule?

Professional School Counselor Name: _____

Professional School Counselor Signature: _____

Date of Form Completion: _____