Checkout will begin on Thursday, April 18th with your academic class teachers and other home high school personnel. Your home high school administrator or designee must sign this form and approve your Capstone prior to exiting. Students will not be permitted to attend Capstone without their home high school approval. Final check out with your program instructor will be on Thursday, April 18th. You must attend all of your classes on Thursday April 18th.

Student Name: ____________________________       CTE Program: ____________________________

Student Contact Information:
Phone: ____________________________       Email: ____________________________
Home School: ____________________________       Capstone Location: ____________________________
Capstone Onsite Coordinator Contact Name: ____________________________
Capstone Onsite Coordinator Phone Number: ____________________________

<table>
<thead>
<tr>
<th>Subject</th>
<th>Teacher</th>
<th>Passing 4TH 9 Wks.</th>
<th>Passing Year</th>
<th>Books Returned</th>
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<td>CTE Program</td>
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<td>Elective(s)</td>
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_Each item must be initialed:_
Commitment Form Completed (Instructor) ____________
Treasurer/Bookstore (verify fees owed) ____________
Media Center/Library (overdue materials) ____________
Clinic (nurse) ____________
Graduation Participation Form (12th grade office) ____________
Final Transcript Request (Guidance) ____________

This completed form must be approved by your Home High School designee, your CTE program instructor and by the CTE administrator prior to exiting for Capstone. The Home High School must check: “Yes Approved” or “Not Approved”

__________________________________________       Yes Approved [ ]       Not Approved [ ]
*student is eligible to graduate

__________________________________________       ____________________________
School Counselor Signature       CTE Instructor

__________________________________________       ____________________________
CTE Administrator       CTE Administrator