

FORM-B

RUTHERFORD COUNTY BOARD OF EDUCATION
OUT-OF-SCHOOL EXPERIENCE APPLICATION

Students Name _____

Current School _____

I am applying for _____ 1/2 credit _____ 1 credit in (program
area) _____ for the _____ fall _____ spring _____ summer
semester, (school year) _____ Attached is an official letter or certificate
specifying who the instructor or program supervisor will be/was and the number
of hours involved in lessons, practice, performance, or other program activity.

Student's Signature _____ Date _____

Parent/Guardian's Signature _____ Date _____

School Principal's Action _____ Approved _____ Rejected

Principal's Signature _____ Date _____