STUDENT NAME:		SCHOOL YEAR:	
D.O.B.:		GRADE:	
SUBJECT:	CURRICULUM USED:	FINAL GRADE	NOTES
ENGLISH			
MATHEMATICS			
HISTORY			
SCIENCE			
P. E			
OTHER:			
OTHER:			
Leavist, the above to be a true	e and correct account of my child's scho	and work for the	
school year.	e and correct account of my child's scho	oor work for the	
Parent Signature:		Date:	
Please send this	Cross Biver Academy		
grade report to:	Cross River Academy P. O. Box 1412 Alabaster, AL 35007		

ONLY ONE CREDIT PER SUBJECT. NUMBER GRADES ONLY FOR GRADES 3 - 12 PLEASE. CURRICULUM NAME/LEVEL MUST BE INCLUDED.

\*\*\* IF ADDITIONAL SPACE IS NEEDED FOR CURRICULUM NAME, PLEASE ADD A SEPARATE SHEET