

Alder Grove Charter School-2
Addendum to Master Agreement Grades 7-12
School Year 2025-2026

Student Name: _____ Grade: _____ Birth Date: _____

Student Preferred name: _____

Term: Fall Spring

Entry Date on Master Agreement: _____ Exit Date on Master Agreement: _____

COURSE ADDITION(S): OASIS add-pending completed by CT: _____ (CT initials)

Name of Course	Credits Attempted

CREDIT INCREASE(S): No OASIS action required by CT.

Name of Course	Original Credits Attempted	Increase Credits Attempted to

COURSE DELETION(S): OASIS drop-pending completed by CT: _____ (CT initials)

Name of Course	Credits

REQUIRED SIGNATURES

Student Signature Date

Credentialed Teacher Signature Date

Parent/Guardian Signature Date

Administrator Signature Date