

New Hope Academy of Tennessee

4924 Fort Henry Drive, Suite C, Kingsport, TN 37663

Phone: (423) 239-9700 Fax: (423) 239-9300

Website: www.New-Hope-Academy.com

HIGH SCHOOL ATTENDANCE & GRADE REPORT

School Year: _____

Email to: NHAreport@gmail.com at end of each semester (**no later than** Jan 15 and Jun 15)

Student's Full Name: _____ Grade: _____

OF EDUCATIONAL DAYS: **Fall Days** _____ **Spring Days** _____ **Total Days** _____

Note: Tennessee law requires that students must educate 180 days per school year for 4 hours per school day.

High school students: usually take up to 8 credits per year, and NO MORE than 9.5. College transcript is required for dual enrollment credit.

8th grade students: may take up to 3 high school credits *upon approval*. Apply grades to each class but apply credits to high school classes *only*.

SUBJECT	COURSE NAME	FALL		SPRING		FINAL	
		GRADE	CREDIT	GRADE	CREDIT	GRADE	CREDIT
English							
Math							
Science							
Social Studies							
Bible							
Foreign Language							
PE / Health							
Pers. Fin. / Speech							
Other							
Other							
Other							

Grading Scale: **A** = 93-100 **B** = 85-92 **C** = 76-84 **D** = 70-75 **F** = Below 70 *Please use percentage number grades.*

Parent/Legal Guardian:

Phone #: _____ Email Address: _____

*I hereby acknowledge that the **grades** and **number of educational days** recorded above are true and accurate to the best of my knowledge.*

Fall Signature: _____ Date _____

Spring Signature: _____ Date _____

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