

Checklist of State Requirements Form

Student Name: _____ **School Year:** _____

List all courses taken this year, whether or not they are required:

Course Title:	Criteria:	Credit Earned:	Grade:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total High School Required Credits Earned to Date:

English	1	2	3	4
Math	1	2	3	
Science	1	2	3	
Social Studies	1	2	3	
Arts & Humanities	1	2		

Secondary School Subject Requirements Met to Date (write in year/s covered):

Geography	_____	General Math	_____
Civics	_____	Algebra	_____
World History	_____	Geometry	_____
History of US	_____	Art	_____
History of PA	_____	Literature	_____
Physical Education	_____	Music	_____
Safety Education	_____	Health	_____
Public Speaking	_____	Grammar	_____
Composition	_____		