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COUNSELOR PERMISSION LETTER SUMMER 2020

Counselors, to submit this form digitally please click on this link [Counselor Referral Form](#)
If you don't use Google Suite use this link: [Other Referral Form](#)

Date: _____

Student Name _____

Pacific View Charter School (PVCS) offers courses beginning July 1, 2020. Students may take 2 courses during the six-week summer session. PE, must be taken as a third class only. Courses are one semester--please specify if needs A/S1 or B/S2 of each course.

_____ (Name of High School) has permitted me to take and will accept the following classes:

1. _____
2. _____
3. _____

Comments:

Counselor Name: _____

Counselor Signature: _____ Date: _____

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