

# YEARBOOK APPLICATION for Elective

YEARBOOK ADVISOR: Dr. Fidler • Room 80 • EMAIL: ccardinale-fidler@lvjUSD.org

Student Name:	Grade:
---------------	--------

### DIRECTIONS:

Please complete **both sides of the application** and return to the office **by MONDAY, May 6**. You may use additional paper if needed to answer the questions.

List your current schedule, teachers, and grades you are receiving. **You will need a teacher signature to verify grades.**

Period	Class/Teacher	Teacher Signature and any teacher comments	Current Grade
1	HS KVG H		
5	W V] P		

**Yearbook OBJECTIVES:** (1) to teach students the skills required to create the book and (2) to

Wit