

**GRADUATION REQUIREMENTS: 20 CREDIT COVID GRADUATION WAIVER: FOR THE CLASS OF 2021 ONLY**  
**CORE CREDITS AND ELECTIVE CREDIT**  
**GRAD PATHWAY**

Student name: \_\_\_\_\_ Student ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School from which student will graduate: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

I wish to waive core credits: Number of credits waived: \_\_\_\_\_ (Cannot exceed 2 credits or 1 credit in any subject)

Core Credits requested to be waived:

<i>Class Title</i>	<i>Core Credit Area (i.e. Math/ELA etc.)</i>	<i>Term Attempted (list most recent)</i>

I wish to waive elective credits: Number of credits waived: \_\_\_\_\_

Elective credit Request to be waived - Student Circumstance: (Indicate APEX)

<i>Class Title</i>	<i>Elective Credit Area</i>	<i>Term Attempted (list most recent)</i>

Please indicate below the reason(s) for the requested waiver. Any materials that document the student's circumstances may also be attached to the form (e.g., letter from the student's licensed physician). Computer Apps and PE can be waived if the student has taken the class prior during Covid and failed or if the student has attempted the CAA (Computer Applications Assessment). PE can be waived if the student had taken PE and failed during Covid (or affected by Covid) or they have attempted the PE waiver test.

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Student will be waiving Computer Apps and has wither attempted the class or the CAA

Students granted a waiver must earn a minimum of 20.0 credits. Students may only waive up to 1.0 credit from each required content area within the 17.0 required content credits (4.0 English, 3.0 Math, 3.0 Science, 3.0 Social Studies, 2.0 Health and Fitness, 1.0 Arts, 1.0 Career and Technical Education). These credits will be noted as waived on the student’s high school transcript.

My counselor has reviewed the following with me:

- Waiving credits may have the following impacts: Losing credit for college courses (AP/CiHS); Impact on university entrance and/or meeting university entrance requirement; Impact on NCAA eligibility for future college-athletes; Waived courses will be shown on high school transcripts with a waiver designation.
- Options for completing graduation without a waiver (e.g. summer school; 5<sup>th</sup> year of high school).

Requests must be received by the building principal as early as possible and prior to the anticipated graduation date. The superintendent or designee will approve or deny the waiver. Denials may be appealed in writing to the superintendent or designee.

\_\_\_\_\_  
 Student Signature                      Date                      Parent/Guardian Signature                      Date

*Contact Information:*

Parent/Guardian Phone Number: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

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OFFICE USE ONLY: Form Received Date: \_\_\_\_\_

\_\_\_\_\_  
 Counselor Approval                      Date                      Principal Approval                      Date

If no parent/guardian signature, attempted contacts: \_\_\_\_\_  
 Date

\_\_\_\_\_

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District Office Approval:

The request to waive \_\_\_\_\_ credit(s) is: (circle)                      Approved                      Denied

*Reason for denial:*

- The request was not based on documented or verifiable circumstances that would justify waiver of high school graduation credit.
- The student did not attempt these credits within the COVID disruption.

\_\_\_\_\_  
 Secondary Education Office Approval    Date

Building registrar notified,    Date: \_\_\_\_\_  
 Family notified,    Date: \_\_\_\_\_

Revised April 2021

**CLASS OF 2021 PATHWAY WAIVER**

Student name: \_\_\_\_\_ Student ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School from which student will graduate: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

**\*\*\*This completed form and supporting documentation of method by which student is eligible for the EAA waiver must be retained in the student cumulative file.\*\*\***

**Pathway Area(s) for expedited appeal submission:**

- Math
- ELA
- Both

Initial Contact to student made by: \_\_\_\_\_

Supporting Documentation Included: Y / N      Document(s): \_\_\_\_\_

_____	_____	_____	_____
Student Approval	Date	Counselor Approval	
Date			

_____	_____	_____	_____
Parent/Guardian Approval*	Date	Principal Approval	
Date			

\*If no parent/guardian signature, attempted contacts: \_\_\_\_\_