LAMPETER-STRASBURG SCHOOL DISTRICT
Administration Building

REQUEST FOR EARLY GRADUATION (END OF FIRST SEMESTER)

Student Printed Name: _____
First Name Middle Initial Last Name

Student Mailing Address: _____

Current Grade: _____ Year of Graduation: _____

☐ Student letter/request indicating the purpose/future plans upon early graduation (please attach)

☐ Parent/guardian letter/s granting permission for early graduation (please attach)

The typed letters should be addressed to the Superintendent and submitted to the Lampeter-Strasburg High School Guidance Office by the end of the first semester. Early graduates will be allowed to attend their graduation class's end-of-year activities (prom, senior trip, and class luncheon) provided that they agree to follow all District/School policies and rules while participating at these events. Any actions that require the District to administer discipline may include the suspension of a student from attending the graduation ceremony. Your signature below indicates that you have reviewed and understand the above conditions.

Student Signature: _____

Parent/Guardian Signatures: _____

Parent/Guardian Printed Names: _____

Parent/Guardian Mailing Address: _____

School Counselor Verification: _____

(The counselor signature indicates verification of all graduation requirements to be completed by the conclusion of the first semester (pending successful completion of current courses.)

Principal Endorsement/Recommendation: _____

Superintendent Approval: _____

08/30/18