GRADUATION REQUIREMENTS: 20 CREDIT COVID GRADUATION WAIVER: FOR THE CLASS OF 2021, 2022 and 2023 **CORE CREDITS AND ELECTIVE CREDIT GRAD PATHWAY** TOTAL CREDITS BEING WAIVED: Student name: _____ 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: Class Title **COURSE NUMBER** Core Credit Area (i.e. Math/ELA etc.) Term Attempted (list most recent) I wish to waive Elective credits: Number of credits waived: Elective credit Request to be waived - Student Circumstance: (Indicate APEX) Class Title **COURSE NUMBER** Elective Credit Area Term Attempted (list most recent) 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.

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

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

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 follow entrance and/or meeting university Waived courses will be shown on hig □ Options for completing graduation was Requests must be received by the buthe superintendent or designee will superintendent or designee. 	entrance requirem gh school transcrip vithout a waiver (e uilding principal as	ent; Impact on NCAA elig ts with a waiver designati .g. summer school; 5 th yea early as possible and prio	ibility for future coll on. ar of high school). or to the anticipated	ege-athletes; graduation date.
Student Signature	Date	Parent/Guardian Sig	 gnature	 Date
Contact Information: Parent/Guardian Phone Number:	Pa	rent/Guardian Email:		
OFFICE USE ONLY:		Form Received Date:		
Counselor Approval	Date	Principal Approval		 Date
If no parent/guardian signature, attemp	ted contacts:		Date:	
District Office Approval:				
The request to waive Credit(s	s) is: (circle)	Approved	Denied	
Reason for denial: The request was not based on do graduation credit. The student did not attempt these			vould justify waiver	of high school
		☐ Building registra	ar notified Date: _	
Secondary Education Office Approval	 Date:	☐ Family notified	Date: _	

CLASS OF 2022 PATHWAY WAIVER

Application for COVID Waiver of High School Graduation Credits and/or Graduation Pathway

Student name:	Stude	nt ID #: Dat	e of Birth:	
School from which student will graduate:		Graduation Year:		
***This completed form and supporting docu must be retained in the student cumu	-	ethod by which studer	t is eligible for the EAA waive	er
Pathway Area(s) for expedited appeal sul Math ELA Both	omission:			
Initial Contact to student made by:			<u></u>	
Supporting Documentation Included: Y/N	Document(s): _			
Student Approval	 Date	Counselor Approval		ate
Parent/Guardian Approval*	Date	Principal Approval		ate
*If no parent/guardian signature, attempted of	ontacts:			