

Enterprise High School  
Final Exam Exemption Application 2024 - 2025

**This section is to be completed by the student:**

*This form must be submitted to the teacher whose class you plan to exempt **no later than two days prior to the final exam**. Forms submitted after this date will not be considered.*

**Student Name:** \_\_\_\_\_ **Grade:** 9th 10th 11th 12th

**Course Requesting to Exempt:** \_\_\_\_\_ **Block:** 1 2 3 4

**Eligibility For Final Exam Exemption** (Check the option that applies)

- I have an A in the course (F1) AND no more than 3 absences/ tardies at school throughout the semester. (SA, FT, and EXE do NOT count)
- I have a C or higher in the course (F1) AND perfect attendance/ no tardies at school throughout the entire semester. (SA, FT, and EXE do NOT count)

*\*This exemption policy does NOT apply to AP and DE courses*

*I am requesting to exempt the final exam for the course listed above based upon meeting the criteria marked above. I understand that I must maintain my attendance except the day of the final, I am eligible to exempt **only one exam each semester** based upon these criteria, and that an attempt to exempt multiple exams under this exemption policy will result in a final exam grade of zero (0).*

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**\*Student must maintain attendance qualifications for the entire 9-week period for Q1 exam exemptions.**

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**This section is to be completed by Teacher:**

*Teachers, please place this form in Mrs. Burns's box **by October 9, 2024**.*

Is the student listed above eligible to exempt your final exam based on your records *at the time you received this application*? (If no, return application to student)

- Yes
- No

List date(s) of absence(s) disqualifying student from exempting: \_\_\_\_\_

Did the student listed above meet **and** maintain the criteria for eligibility to exempt your final exam, based on your records? (If no, return to student).

- Yes
- No

List date(s) of absence(s) disqualifying student from exempting: \_\_\_\_\_

I verify that the student named above is eligible to exempt the final exam in my course.

**Teacher Name (Printed):** \_\_\_\_\_ **Teacher Signature:** \_\_\_\_\_