

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 one week 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: _____

This section is to be completed by Teacher:

Teachers, after students submit their form to you, use [Directions for Verification of Student Attendance](#) to answer the following questions. Then, place this application in Ms. Burns's box by **Thursday, May 8th for Seniors and Thursday, May 15th for Underclassmen** and complete the [Google Form for Student Exemptions](#). **Students must still attend review day prior to the final exam unless the absence does not compromise their initial qualification.**

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 eligibility to exempt your final exam, based on your records, through May 8 (Seniors) / May 15 (Underclassmen)? 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:** _____