

PINELLAS COUNTY SCHOOLS
EXAM WAIVER APPROVAL FORM

Name: _____ Grade: _____ Semester: ☐ 1 or 2 ☐

Note: Some courses have mandatory first semester final exams. Students may waive up to three exams each semester (except second semester seniors may waive all exams if they qualify). A student may not waive an exam in a yearlong course both semesters.

Per	Course	Teacher Name	Number of Absences 1st Grading Period	Number of Absences 2nd Grading Period	Number of Absences for Semester	Total Number of Absences	Grade 1st Grading Period	Grade 2nd Grading Period	Meets requirement to waive exam	Teacher Signature
1									☐ Y ☐ N ☐	
2									☐ Y ☐ N ☐	
3									☐ Y ☐ N ☐	
4									☐ Y ☐ N ☐	
5									☐ Y ☐ N ☐	
6									☐ Y ☐ N ☐	
7									☐ Y ☐ N ☐	
8									☐ Y ☐ N ☐	

I elect to waive the following three exams this semester:

Period	Course	Teacher Name	Teacher Approval Signature	Administrator Signature

Student Signature: _____

I elect to have this form serve as a Permit to Leave for my student for the exams they waive. Students may leave only after the entire exam period ends and may not leave during an exam period. If the student does not attend a waived exam, it will not count as an absence. In checking "yes", I agree to take responsibility for my student during the waived exams.

☐ Yes ☐ No Parent Signature: _____