

Last Name: _____	FSPS Student ID #: _____
First Name: _____	Date of Birth: _____
Parent/Guardian: _____	Grade: _____
Email: _____	Phone: _____

The Fort Smith Public Schools Board of Education may grant a waiver of the 75-Hour Community Service Learning Graduation Requirement for extenuating circumstances on a case by case basis. Extenuating circumstances permitted may include major illness of the student, major illness of a member of a student's family, student homelessness, or because the student is a major contributor to family income.

I am requesting an exemption from the requirement to earn 75 hours of Community Service Learning for the following reason(s):

- ☐ Student or Family Illness
- ☐ Medically fragile student per IDEA
- ☐ Student homelessness
- ☐ Working Student
- ☐ IEP exclusion

Documentation of the extenuating circumstance is required. Please attach documentation to this form. Acceptable documentation can include:

- Letter from a physician outlining medical condition of student or immediate family member and the need for exemption from the Community Service Learning graduation requirement.
- Documentation of employment – signed by employer
- Documentation of hardship – letter, eviction notices, etc.
- Letter from court or attorney.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

NOTE: Students should register to participate in Community Service Learning and then complete this request. Requests will be accepted beginning the first week of school. Students should continue to accumulate community service learning hours until they receive a waiver approval from the Fort Smith Board of Education.

FOR OFFICE USE ONLY - COUNSELOR

Date Received: _____

Student's Current Classification based on credit hours: _____

Total number of Community Service Learning hours earned to date: _____

Person completing form: _____ Title: _____

Signature: _____ Date: _____

FOR OFFICE USE ONLY- Principal ONLY

Approved ☐

Denied ☐

Reason for Denial: _____

Principal's Name: _____

Principal's Signature: _____ Date: _____