



ATTENDANCE WAIVER REQUEST FORM

A parent may request a waiver of the attendance regulation (seat-time requirement) for transfer students and those with documented family or medical extenuating circumstances that resulted in an excessive number of absences. The waiver request may be submitted to the principal or administrative designee prior to the close of a semester but no later than ten days after the close of a semester course. The principal or administrative designee shall act upon the waiver request within ten administrative days and shall notify the parent of the decision within five administrative days after the decision has been made.

SCHOOL: _____ DATE OF REQUEST: _____

STUDENT NAME: _____

STUDENT GRADE: _____ STUDENT ID: _____

PARENT/GUARDIAN PHONE: _____

WAIVER REQUEST (Check One): _____ Fall Semester _____ Spring Semester

LIST COURSES FOR WHICH A FAILING GRADE IS DUE TO EXCESSIVE ABSENCES

COURSE	BLOCK	TEACHER	NUMBER OF ABSENCES

Indicate the extenuating circumstances for which this waiver request is being filed:

_____ A. Transfer student to or from a division with differing attendance or clock hour requirements.

_____ B. Documented family or medical extenuating circumstances.

Attach any appropriate documentation (i.e. physician statement) not already provided to the school at the time of the absence(s).

Please note: Waivers will only be granted if the student has demonstrated mastery of course standards and competencies by earning a passing final grade for the course(s), as demonstrated by course performance and end-of-course summative assessment(s).

Student Signature: _____

Parent Signature: _____



WAIVER APPROVAL AND GRADE CHANGE FORM

STUDENT NAME: _____

GRADE: _____

WAIVER REQUEST (Check One): _____ Fall Semester _____ Spring Semester

OFFICE USE ONLY	
Date Request Received: _____	Date Request Acted Upon: _____
Comments: _____	

_____ APPROVED	_____ DISAPPROVED
Principal or Administrative Designee Signature: _____	

BLOCK	COURSE NAME AND SECTION	TEACHER NAME	SEMESTER GRADE