

Corvallis High School

INSTRUCTION

2410F
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Waiver of Graduation Requirements

Corvallis High School

PO Box 700

Corvallis, MT 59828

Request for Waiver of Graduation Requirements

Waiver of Course Requirements

I am requesting a deviation from the graduation requirements as outlined in Corvallis School District Policy 2410P. I understand that I must provide the following information to the Corvallis High School Principal so that he/she may propose the deviations to the Superintendent who may make a recommendation to the Corvallis School District Board of Trustees.

I am hereby requesting a deviation from the graduation requirements for the 20__-20__ school year.

Student's Name	Date of Birth	Current Grade	Anticipated Graduation Date

Name and address of custodial parent, legal guardian or other person with documented legal custody of this student. If there are separate addresses for mother and father, please list both.

Course Waiver Request Requirements.

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|--|-----|----|
| 1. I have read and understand policies, 2410, 2410P, and 2168 (attached). | Yes | No |
| 2. I would like to enroll in a course that is NOT offered by Corvallis High School. | Yes | No |
| 3. I would like to take a course(s) via distance, online, or technology delivered Instruction other than a course offered through the Montana Digital Academy. | Yes | No |
| 4. I am taking a course for university credit and would like the course to count toward high school graduation. | Yes | No |
| 5. This course will replace a required course at Corvallis High School for graduation. | Yes | No |

In the space below, please provide the Principal with the following information concerning the course (s) that you would like to take:

6. Course title _____

7. Academic institution providing the course _____

8. Number of high school credits given to the course? _____
9. Attach a copy of your unofficial transcripts from Corvallis High School. Copies may be obtained through the high school office or counseling department.
10. Attach a copy of your Corvallis High School credit analysis. Copies may be obtained through the counseling office.
11. Explain the reasons for your request for a deviation from the adopted graduation requirements as outlined in the Corvallis School District policies 2410, 2410P and 2168. A letter of explanation may be attached.

<u>Corvallis Public School use only:</u>			
Date Waiver Request Received	_____		
Unofficial Transcript	_____		
Credit Analysis	_____		
Counselor Consultation	_____	Date:	_____
Meeting with Student, Parent/Guardian	_____	Date:	_____
CHS Principal Proposal to Superintendent	_____	Date:	_____
Recommendation by Superintendent	_____	Date:	_____
Corvallis School Board:			
Waiver requirement is hereby:	Approved	Denied	Date
	_____	_____	_____

Policy History:
 Adopted on: 11-9-10
 Revised on: 2-6-2012