



Waiver of High School Graduation Credits

Student Name: _____
(Last) (First) (Middle)

Date: _____ Grade Level: 11th _____ 12th _____

Number of Elective Credits for Waiver Request: 0.5 _____ 1.0 _____ 1.5 _____ 2.0 _____

WAC 180-51-068 (12) A school district that grants high school diplomas may waive up to two of the credits required for graduation under this section for individual students for reason of unusual circumstances, as defined by the district.

Reason for request: _____

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Attach a completed copy of your High School and Beyond plan sheet.

Right of Appeal – Olympia School District Board of Directors Procedure 2418P: The parent/guardian or eligible student shall be notified that an appeal to the decision on waiver requests may be made in writing to the Superintendent no later than thirty (30) days prior to the anticipated graduation date.

OFFICE USE ONLY

Counselor recommendation: Approve Deny Signature: _____ Date: _____

Approve waiver of _____ elective credits Deny

Rationale: _____

Administrator Signature: _____ Date: _____