

Chimacum High School

REQUEST FOR A COURSE WAIVER

The Washington State Board of Education and the Chimacum School District Board of Directors have established graduation requirements for all students. It is our expectation that all students make a good faith effort to complete the requirements as written. However, we also understand that on occasion, a unique or extenuating circumstance may necessitate a waiver request. Please note that the waiver of a requirement does not reduce the number of credits that must be completed to earn a diploma.

Student _____ Date _____

Grade _____ Number of Waiver Credits Requested _____

Please explain in detail the reason for your request. Attach an extra sheet if necessary.

If you are requesting a PE waiver due to sports or marching band participation, please complete the section below. Please note that you must have successfully completed an entire season to be eligible for a waiver, and a coach's signature is required.

	Sport/Activity	Year	Coach/Teacher Signature
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Student Signature _____ Date _____

Parent Signature _____ Date _____

Counselor's Signature _____ Date _____

Principal's Signature _____ Date _____