Sent Via:	Principal/Designee's Initials:
Fax to (Date Received:
U.S. Mail	Hand Delivered
REQUEST	FOR WAIVER OF DISTRICT GRADUATION REQUIREMENTS BEYOND THE STATEW IDE MINIMUM REQUIREMENTS
Date: /	
Principal: _	School:
Address: _	
	Request for W aiver of District Graduation Requirements Beyond the Statewide Minimum Requirements
	Student Name: D.O.B.: / / Special Education Student
Dear Sir or I	Madam:
We are writi will soon be	ing to inform you that (student name), a student in your school, is or eligible to graduate, having completed the statewide minimum graduation requirements.
We have atta	is not "reasonably able" to complete these requirements because
We have als	so attached documentation that (student name) has completed the
statewide mi	inimum requirements for graduation, including:
(1) (2) (3) (4) (5) (6)	Three courses in English. Two courses in mathematics. Two courses in science, including biological and physical sciences. Three courses in social studies, including United States history and geography; world history, culture, and geography; a one-semester course in American government and civics; and a one-semester course in economics. One course in visual or performing arts or foreign language. Two courses in physical education. ²
authoriz	provide our office with confirmation that (student name) is ed to graduate having completed these courses. If you have any questions, please contact Thank you in advance for your assistance.
Sincerel	y,
Signature Enclosu	e of Parent/Legal Guardian/Student/Advocate re(s)

¹ Cal. Educ. Code § 51225.3(c). ² Cal. Educ. Code § 51225.3(a)(1)(A)-(F).