

Student Graduation/Completion Approval Request

Page 1 of Graduation/Completion Packet

(For ES use for High School Potential Graduate/Completion/School Certificates only)

Mail Graduation/Completion Packet (see ES Handbook for specific requirements) to your ES Advisor

Date Submitted to Advisor: _____ Graduation/Completion Date Requested: _____

Student Number: _____ Student Name: _____

Current Student Mailing Address: _____

ES Name: _____ ES Advisor: _____

Please check **ONE** from the list below: endorsement type for graduate or for non-grads, choose school certificate or completion below for this student. Attach any needed paperwork to support the selection.

For Graduates:

- ____ General Studies Endorsement
- ____ College or University Prep Endorsement
- ____ Vocational Endorsement

For those earning a completion or school certificate:

- ____ Certificate of Completion (Check definition before completing this box and check with Special Ed Dept.)
- ____ School Certificate

Will student be participating in graduation ceremonies (if applicable)? Yes No

Diploma/Certificate of Completion Information

Diplomas/Certificate of Completions/School Certificates will be mailed from the office as they are processed. A diploma cover will be given to the student at the graduation ceremony. If the student does not participate in the ceremony and desires a diploma cover, it may be picked up from the school office anytime after the ceremony date.

As of today's date, this student: (Please check one)

- ____ Has passed both sections of CAHSEE and is now eligible for a school diploma
- ____ Is waiting for results from a CAHSEE test: (circle which one) Math ELA
- ____ Will be receiving a Certificate of Completion per ES consultation with Special Ed department.
- ____ Has opted to accept a School Completion certificate instead of a diploma.

My signature below indicates I understand that if I do not PASS both sections of the CAHSEE, I will NOT be eligible for a school diploma, but will receive a School Certificate instead.

For ES Use prior to submitting to ES Advisor:			
Student Signature:		Date:	
Parent Signature:		Date:	
ES Signature:		Date:	
ES Advisor Use:			
Administration Approval:		Date:	
For Mediation Use Only (If Needed):			
Graduation/Completion for this student as submitted.	Agreed to:	Yes	No
ES Signature:		Date:	
ES Advisor Signature:		Date:	
Director Signature:		Date:	
For Office Use Only:			
Diploma Mailed:		Office Personnel Initials:	
Signature of Person Picking Up Diploma:			
Printed Name:		Date:	