

Pathways Portfolio Waiver Form

Student Name (Last, First, Mic	ddle Initial) D	vate of Birth	Grade	Local ID
s required by the Graduation Requires to the Graduation Requires to the Graduation Requires to the Graduation Requires the Gra				f Directors, all studen
ne Board of Directors have appr aiver is only available to 12 th gra emester of the academic school	ade students who tran			
a student is approved for a Path equirements. A Pathways Portfo eflected on a high school transcr	olio Waiver does not gi	•		
we acknowledge and have read alligibility requirements.	nd understand the Grad	uation Require	ements and Po	athways Portfolio Wa
arent/Guardian's Signature Inless the student is 18 or older)	Date	Student's Signa	ature	Date
Counselor's Signature	 Date	Teacher's Sign	nature	Date
School use only				
The requested exemption for	Student's Full Name	ha	s beena	pproved / denied
Evecutive Director or Designed	a's Signature			

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