

**Walla Walla School District**

**Emergency Waiver for State Required Graduation Credits**

Applies only to the Graduating Class of 2020 & 2021

Student Full Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**Instructions:** Counselors will complete this form in consultation with the student and their parent/guardian. This form will be submitted to the Director of Teaching and Learning with counselor and principal signatures. The form will be reviewed for approval by a district committee noted below.

**Emergency waiver**

The Washington State Board of Education (SBE) created an emergency waiver program to ensure students in the graduating class of 2020 or 2021 who were “on track to graduate” before the COVID-19 emergency are not negatively impacted. This waiver applies to current high school seniors. “On track” to graduate means that the student could have reasonably completed courses and credits by the end of the 2021 school year, had it not been for the pandemic. This waiver cannot be used to graduate early.

The waiver applies to courses and other credit-earning opportunities seniors were enrolled as active seniors for the current school year. Waived graduation requirement credits may include both core credit graduation requirements and elective credit graduation requirements. A student must earn at least 20 credits to be eligible for this waiver. Additionally, the waiver can be applied to a student’s Graduation Pathway. Prior to the approval of a waiver, the district must make a “good faith effort” to assist the student in satisfying course requirements and deficiencies.

**Good Faith Effort**

Both the student and school will make a good faith effort in supporting the student in earning necessary credits and completing their Graduation Pathway. Students will meet class and assessment obligations to the degree they are able. The school/district will consider and implement appropriate options or supports to assist the student in meeting the requirements.

**Benefits and limitations**

Waived credits/courses will appear on the high school transcript. Students are encouraged to contact the post-secondary schools they are applying to ask and how post-secondary schools are treating waived credits due to the COVID-19 emergency. Waived credits may also have implications for potential NCAA college athletes. Depending on their post-high school goals and situation, students may choose to complete courses/credits in summer school.

**Required Criteria:**

Good faith efforts to complete Graduation Pathway and/or credits were attempted by the student

Student’s unique circumstances “substantially limit” their ability to complete courses/credits

Student/family understands benefits and limitations

Planned courses and credits are consistent with post-high school goals (High School and Beyond Plan)

I understand and agree to the benefits and limitations that may occur by waiver of high school credits.

Provide a full explanation of request for the waiver items below. Include the unique circumstance which impacted the student and the good faith efforts made by the school and student.

Parent/Guardian Signature \_\_\_\_\_

Student Signature \_\_\_\_\_

**Course requirements**

| Course | Credits | Graduation Requirement Area | Notes |
|--------|---------|-----------------------------|-------|
|        |         |                             |       |
|        |         |                             |       |
|        |         |                             |       |
|        |         |                             |       |

**Graduation Pathway Requirement**

| Intended Pathway | Additional Notes |
|------------------|------------------|
|                  |                  |

Provide an explanation of the school's good faith efforts in supporting the student toward meeting full graduation requirements and/or Graduation Pathway.

I approve of this request and attest to the accuracy of the above information. Additionally the school has made a best faith effort to provide support or alternate opportunities for the student to meet the requirements.

Counselor: \_\_\_\_\_

Principal: \_\_\_\_\_

A committee of educators including at minimum: Director of Teaching & Learning, Director of Equity and Dual Programs, Director of Special Education, District Behavior Specialist, and Curriculum Coordinator will weigh the evidence provided and render a majority decision consistent with the intent of the SBE guidelines. The decision and rationale will be stated below and signed by the Director of Teaching & Learning as the committee's recommendation. If the applicant disagrees with the decision, they have the right to appeal within three (3) business days to the Assistant Superintendent. The Assistant Superintendent will reconvene the committee for a second review with additional evidence of the application with the Assistant Superintendent as a voting member.

Committee Decision and Comments:

| Title                           | Name             | Electronic Signature |
|---------------------------------|------------------|----------------------|
| Director of Teaching & Learning | Christy Krutulis | _____                |

*Walla Walla School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained guide dog or service animal and provides equal access to designated youth groups.*

*This form is to be retained in the student's cumulative file along with recorded on the academic transcript.*