



Prior Notice and Consent for Alternative High School Diploma

Dear _____

Date _____

Student Name / ID#: _____ has earned the required credit for coursework towards one of the following diploma options marked below as according to state and district policies and procedures.

<input type="checkbox"/> Modified Diploma	<u>24 Credits</u> <input type="checkbox"/> English: 3 credits <input type="checkbox"/> Science: 2 credits <input type="checkbox"/> Health: 1 credit <input type="checkbox"/> Career Technical Education: 1 credit (+12 elective credits) <input type="checkbox"/> Math: 2 credits <input type="checkbox"/> PE: 1 credit <input type="checkbox"/> Social Sciences: 2 credits
<input type="checkbox"/> Extended Diploma	<u>12 Credits</u> <input type="checkbox"/> English: 2 credits <input type="checkbox"/> Science: 2 credits <input type="checkbox"/> Health: 1 credit <input type="checkbox"/> Career Technical Education: 1 credit Credits earned in a self-contained classroom have been checked <input type="checkbox"/> Math: 2 credits <input type="checkbox"/> Social Sciences: 3 credits <input type="checkbox"/> PE: 1 credit

This proposal is based on the following:

Other options considered were:

We decided against these options because:

Any other factors considered by the team:

Sincerely, _____
Name/Title

_____ Phone

Consent for the Award of Alternate High School Diploma

We request your consent because:

A school district may award a modified or extended diploma to a student only upon the consent of the parent or guardian of the student. A district or school must receive the consent in writing and during the school year in which the modified or extended diploma is awarded. The requirement for obtaining the consent of a student's parent or guardian does not apply to a student who is emancipated or has reached the age of majority of 18 years of age or older at the time the modified or extended diploma is awarded.

- ☐ I give my consent for the school district to award the diploma indicated above. I understand my consent is voluntary.
- ☐ I refuse consent for the school district to award the diploma option indicated above.

Signature (Parent/Guardian/Surrogate Parent)

Date (mm/dd/yyyy)

Parents of a child with a disability have protection under the Procedural Safeguards. For a copy of the Procedural Safeguards or assistance understanding this information, please contact the person named above.

- ☐ A copy of the *Notice of Procedural Safeguards* has been given to the parent.