

24-CREDIT DIPLOMA APPLICATION

1. Date of Application: _____

2. School: _____

3. Student Information

Full Name: _____ Phone: _____

Student Number: _____ Current Grade: _____

Address: _____

4. Parent/Guardian Information

Name: _____ Phone: _____

Address: _____

Email: _____

5. Please explain why this application is being made and provide details of the plan.

I understand that if a student is on-track to receive a 24-credit diploma, they must meet state core requirements and are not eligible for early graduation. I understand that my student will not be able to walk at his/her local high school graduation ceremony. My student will receive a "Valley High School" diploma and may walk at the Valley High School graduation ceremony.

Student Signature

Parent/Guardian Signature

Counselor Signature

Principal Signature

Administrator of Schools Signature