



ROOSEVELT HIGH SCHOOL EARLY GRADUATION REQUEST FORM

In accordance with PPS Board Policy [4.20.042-P](#), students may request to graduate in fewer than four years. As per policy, the student must fulfill graduation requirements and obtain consent from their parent or guardian.

Roosevelt High School encourages students to take a rigorous class schedule all four years of high school to prepare for post-secondary programs such as college, apprenticeships, and careers in the workforce. This includes Advanced Placement, a fourth year of Math and Science, Spanish Immersion, AVID, and dual credit options. Students are discouraged from graduating early because of the variety of advanced course options available in high school at no cost to families. Our goal is for students to take advantage of all opportunities and resources available to them while in high school in order to be best prepared for all post-secondary options and to limit the financial burden placed upon families by colleges and universities. Graduating in three years limits the time available to take advantage of these course options and it is important for families to be aware that federal financial aid does not pay for remedial courses.

Students requesting the option of early graduation must understand and meet the following criteria:

1. All course requirements, including all [PPS graduation requirements](#), must be met prior to their early graduation date.
 - a. Students may not double up on English courses during their regular school day. Completing their junior English class must take place outside of RHS and is a family responsibility.
 - b. Students will only be allowed to enroll in senior support classes, such as Essential Skills workshops, if space permits.
 - c. If advanced/dual credit/AP courses are at full capacity, priority will go to students in their fourth year of high school.
2. Students interested in participating in college sports must have met NCAA requirements.
3. **This request must be made and approved before the end of the student's sophomore year.**

In addition, students approved for early graduation who have completed all graduation requirements:

- **cannot** participate in any school sponsored sport, club or related activity after graduation
- **cannot** be on campus, except as a visitor (visitor procedures apply)
- **may** participate in Prom, graduation practice, the graduation ceremony and the senior all-night party the year they graduate

Reason for early graduation and post-secondary plan:

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| I have already completed the following: | | <input type="checkbox"/> Course credits (24.0) <input type="checkbox"/> 2 CRLEs <input type="checkbox"/> Resume <input type="checkbox"/> My Plan Essay | <input type="checkbox"/> Essential Skills <input type="checkbox"/> Math <input type="checkbox"/> Reading <input type="checkbox"/> Writing |
| Plan for completing any outstanding graduation requirements: | | | |
| Senior Activity Participation (must be in good standing): | | | |
| | | <input type="checkbox"/> Graduation Ceremony | <input type="checkbox"/> Prom |
| | | <input type="checkbox"/> All-Night Party | |
| Early graduation date: | | | |
| Student's Name (please print) | | Student's Signature | Date |
| Parent/Guardian Name (please print) | | Parent/Guardian Signature | Date |

Students and a parent/guardian are required to meet with the student's counselor and an administrator in order to obtain approval of early graduation.

OFFICE USE ONLY

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| C O U N S E L O R | Meets graduation requirements: | |
| | <input type="checkbox"/> Course credits (24.0) <input type="checkbox"/> 2 CRLEs <input type="checkbox"/> Resume <input type="checkbox"/> My Plan Essay | <input type="checkbox"/> Essential Skills <input type="checkbox"/> Math <input type="checkbox"/> Reading <input type="checkbox"/> Writing |
| | Counselor Signature: | Date: |
| A D M I N I S T R A T O R | Meeting scheduled with Administrator (VP Secretary): | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | Date: | |
| | Administrator Comments from Meeting: | |
| | Administrative Approval: | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | Administrator Signature: | Date: |
| | Admin Secretary sent notice of decision to family and counselor: | Date: |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | |