



Application for waiver

(Reminder: Daycare/childcare waivers not accepted.)

A copy of this completed and signed form is to be distributed to

- parent/guardian
principal of student's home school
principal of the requested school (if approved by home school principal)
school counselor/student's cumulative file

Due dates
April 15 for elementary and middle schools
Feb. 15 for high schools

Date form received by
home school
requested school

This waiver request is for the school year.

Student's home school Requested school
elementary
middle
high
applies only to reasons 3 and 4 (see bottom of page)

Waivers are valid for one academic year only and must be renewed annually. If a waiver is approved, the parent/guardian is responsible for providing transportation to the non-home school. Among other reasons, waivers may be denied for unacceptable academic performance at either school and may be denied or revoked for

- unacceptable behavior at either school or
unacceptable attendance (including unacceptable late arrivals or early dismissals) at either school

Also, in accordance with Virginia High School League policy, students who transfer via this waiver are automatically ineligible for VHSL activities for one full calendar year (365 days) from the date the waiver is effective. Exceptions may be granted only by the superintendent through the Office of High School Leadership.

Waiver status Check one box.

- request for first-year waiver (must be submitted to the principal of the student's home school)
request for renewal of waiver (must be submitted to the principal of the student's requested school)

Student and parent/guardian information

Student's name Student ID number

Student's address with city and ZIP Student lives with

Home phone Date of birth Grade level for waiver year

Mother's name and address with city and ZIP

Mother's home phone Mother's cell

Father's name and address with city and ZIP

Father's home phone Father's cell

Reason for waiver request

Application will not be processed without appropriate documentation, all of which must be submitted — with this waiver application — by the applicable deadline. Please check the reason that applies:

- 1. A legitimate emotional, social or family concern. Any such request must be accompanied by appropriate documentation (law enforcement reports, physician reports, psychologist reports, etc.) as well as a detailed description of the parent's multiple attempts to keep the student at the home school. In addition, the physician/psychologist, as applicable, must provide information on Page 2 of this form. Parent is not permitted to request a specific school; student will be placed.
2. A series of high school courses not available at the home high school. All such courses must be offered for graduation credit; not offered at the student's home high school; and be the continuation of a course sequence the student took in middle school for high school credit (with the exception of JROTC at the high school level). On a separate sheet, specify the high school courses that are the subject of this waiver request. Parent is not permitted to request a specific high school; student will be placed.
3. A CCPS employee at this site:
The request must be for the school where the child's parent/legal guardian is assigned (for employees assigned to a school) or for the school closest to the employee's work location (for employees not assigned to a school). Waiver cannot result in unacceptable interference with the employee's work performance or that of other employees.
4. Other. Please specify an acceptable reason from Regulation 4040-R and include appropriate documentation.

Additional information required from parent/guardian

To determine whether services can be provided at the requested school, indicate whether or not the student has an exceptional education individualized education plan (IEP), 504 plan or health services plan.

- My child has an IEP, 504 plan or health services plan, and her or his primary disability is _____
Attach a copy of the student's current plan.
- My child does not have an IEP, 504 plan or health services plan.

A parent requesting a waiver pursuant to Regulation 4040-R is required to **attach verification** that — for the current school year — the student who is the subject of this waiver application has had

- regular school attendance with few absences (including late arrivals and early dismissals)
- acceptable academic performance and
- acceptable behavior with few disciplinary referrals

Among other documents, a parent may attach a copy of the student's report cards from the current school year.

Physician/psychologist attestation and signature

Name of physician/psychologist _____

By my signature below, I confirm that the student identified on this form has been diagnosed with _____
_____ with the resulting consequences:

Signature of physician/psychologist _____ Date _____

Parent/guardian attestation and signature • deadline April 15 for elementary/middle schools, Feb. 15 for high schools

By my signature below, I confirm that all of the information I have provided in this application is true and accurate and that

I am familiar with the requirements of Regulation 4040-R, Waiver for a Student to Attend Other Than Home School.

If my waiver request is approved, I agree to actively participate in my child's education at the requested school. Participation includes, but is not limited to, providing transportation so that my child attends school regularly, attending parent-teacher conferences, responding to correspondence from the school, etc. **By my signature, I acknowledge that the principal's decision is final and not appealable.**

Signature of parent/guardian _____ Date _____

Approval/denial

Principal of home school • If approved, forward to principal of requested school.

This application is approved denied Signature _____ Date _____

If denied, state the reason for denial. _____

If conditions apply, list each one and the date by which it must be fulfilled. _____

Principal of requested school

This application is approved denied Signature _____ Date _____

If denied, state the reason for denial. _____

If conditions apply, list each one and the date by which it must be fulfilled. _____