## APPLICATION FOR EARLY GRADUATION

## Return to Guidance before October 1st

Name				
Address Phone Number Reason for early graduation :  Student and Parent Initial When Completed COMPLETED BY C				
				COUNSELOR
Course require	ements met		Yes	No
State testing requirements met			Yes	No
Volunteer hours completed			Yes	No
Senior conference completed			Yes	No
All financial obligations satisfied			Yes	No
Parent/Guardia	in meeting: Date Schedul	ed:	Yes	No
Principal's signature  ***********************************	Date			Date
Oo you plan on participating in for If no, you may obtain y ceremonies have been com	your diploma by persona pleted in May.	ally contacting the school		
If yes, it will be your responsible of the various senior activities.  PLEASE NOTE*  • After a student graduates longer have access to service.  • Final Transcripts will not be the first semester.	from Copley High Schoo ces and events available to	ol the student will be consided currently enrolled students	ered a "grac s.	luate" and no
Parent's signature	Date	Student's signature	)	Date