

**WILMINGTON AREA HIGH SCHOOL**  
**Academic Waiver Form**

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Student Name \_\_\_\_\_ Grade Level \_\_\_\_\_ Date \_\_\_\_\_

Recommended Course \_\_\_\_\_ Requested Course \_\_\_\_\_

**Waiver Philosophy**

*A waiver is a contract between the student, parent/guardian, and the school district. It provides a placement which supersedes the recommended level. This action carries with it responsibility and accountability. Neither curricular content nor performance expectations of a course will be deleted or diminished to accommodate waived students.*

**Waiver Procedure**

- 1- The student must compose and attach a written rationale regarding why he/she would be successful in the requested academic course.*
- 2- The completed Academic Waiver Form and the rationale must be returned to the Principal.*
- 3- The parent/guardian must contact the Principal to coordinate a meeting between the student, parent/guardian, Principal, School Counselor, and the student's current teacher, as well as the teacher of the course in which the student wishes to enroll. All parties will discuss the academic course request.*
- 4- The Academic Waiver Form must be signed below by all interested parties before the student will be enrolled in the requested course.*
- 5- Once the waiver procedure is complete, the student will be required to remain in the class unless permission to withdraw is given by the Principal.*

**Student Responsibility and Accountability**

*If a student is experiencing difficulty in a class into which he or she has wavered into, the follow actions **must** take place prior to a request for a change of schedule:*

- 1- The student must exhibit active participation in the class by doing homework, taking notes, and giving effort commensurate with ability.*
- 2- The student must seek help outside the normal classroom setting if difficulties continue. Tutoring by the teacher, other teachers in the school, parent volunteers, peer tutors, and paid tutors must be considered.*

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*I am in agreement to allow \_\_\_\_\_ to enroll in the requested academic course listed above for the \_\_\_\_\_ school year. The expectations of the course have been explained to the student and parent/guardian.*

*Please sign below, indicating your agreement to the request:*

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

Principal: \_\_\_\_\_ Date: \_\_\_\_\_