

SANBORN REGIONAL SCHOOL DISTRICT

SRSD File: IKF-E

REQUEST FOR STATE OF NEW HAMPSHIRE MINIMUM STANDARDS DIPLOMA

STUDENT'S NAME _____ CLASS OF _____

PERSON INITIATING REQUEST _____ DATE _____

Purpose and Use

This form is to be used to request that a student be allowed to pursue a State of New Hampshire Minimum Standards Diploma as specified in Policy IKF and as outlined below.

- a. The 20 credit diploma option may be chosen no earlier than July 1 prior to the student's senior year and no later than February 1 of the student's senior year.
- b. Students who earn a 20 credit State of New Hampshire Minimum Standards Diploma may walk with their graduating class.
- c. A student transferring to Sanborn Regional as a 12th grader may be eligible for a 20 credit State of New Hampshire Minimum Standards Diploma if the following conditions were met:
 - The student was on schedule to be a senior at his/her previous school.
 - The student was made aware of their right to stay at Sanborn Regional High School and receive a 28 credit College and Career Diploma.
- d. A student who fails to earn the 28 credits needed to receive a College and Career Diploma and who did not apply for a 20 credit State of New Hampshire Minimum Standards Diploma before February 1 of their senior year, may be considered for a State of New Hampshire Minimum Standards Diploma by applying after July 1 following his/her scheduled graduation date.

Rationale

Please attach a statement outlining, the reason(s) for requesting a *New Hampshire Minimum Standards Diploma*. Please be brief, but specific. In addition, please provide supportive documentation, such as progress reports, or other written recommendations.

Agreement of Understanding

By signing below, the individuals whose names appear are stating that they have received a copy of Policy IKF, and they understand that a State of New Hampshire Minimum Standards Diploma has different requirements than the College and Career Diploma, and that the decision to work toward the College and Career Diploma may be made at any time in the future, but would require a change in this student's program of studies.

PRINT NAME	SIGNATURE	DATE SIGNED
_____ Student	_____	_____
_____ Parent or Guardian	_____	_____
_____ Guidance Counselor	_____	_____
_____ Principal	_____	_____
_____ Superintendent of Schools	_____	_____

Effective: December 18, 1996

Revised: October 2, 2013