

**APPLICATION FOR EXCEPTION TO REQUIREMENT
FOR GENERAL EDUCATION DEVELOPMENT TEST (GED)**

PLEASE PRINT

STUDENT'S NAME _____ SOC.SEC.NO _____

ADDRESS _____ ZIP CODE _____

STUDENT NO _____ DATE OF BIRTH _____ PHONE _____

LAST SCHOOL ATTENDED _____ GRADE _____

REASON FOR REQUEST

The student is enrolled in the District's GED/Exit Option or withdrawing from school to take the General Education Development (GED) test.

- Student must meet at least one of the requirements below.
- Student must also be at least 16 years of age and not more than 17.

QUALIFYING CONDITIONS AND INSTRUCTIONS

MEDICAL CONDITION - Must present medical evidence from one or more attending physicians attesting to the fact that said student is unable to attend school on a FULL-TIME BASIS (**Letter from doctor on letterhead**).

FINANCIAL HARDSHIP - Must present documented evidence of a financial hardship condition, which prohibits the student from full-time attendance in school. (**The Director will review Letter from parent or guardian**).

UNDUE HARDSHIP - Must be supported by documented evidence explaining the unusual nature of hardship, (**Letter from DCF, Principal, Court Order, Parent, ETC.**).

I grant permission for the above named student to apply for a waiver.

PARENT OR GUARDIAN SIGNATURE

DATE

GED/EXIT OPTION PROGRAM

School Official's Signature (School Use Only)

RETURN APPLICATION TO:
Phone: (904) 390-2476
Fax: (904) 390-2075

Gloria R. Lockley, Director
Alternative Education Programs & Behavioral Support
1701 Prudential Drive, 4th Floor
Jacksonville, Florida 32207