

If scheduling allows:

___ AM preferred

___ PM preferred

COBB COUNTY PUBLIC SCHOOLS
MINIMUM DAY APPLICATION

___ Fall semester

___ Spring semester

___ Both semesters

High School seniors may qualify for minimum day according to the following provisions:

1. Students must have earned seventeen and one-half (17.5) units prior to Fall Semester participation.
2. Students must have earned nineteen and one-half (19.5) units prior to Spring Semester participation.
3. Students must have passed or be enrolled in the specified courses for high school graduation.
4. Students may be released for one (1) class per day only.
5. Students may not be scheduled for Minimum Day and either the Mentorship Program or Work Program during the same semester.
6. Student eligibility for extra-curricular activities (including sports) may be affected if any classes are failed, dropped, or audited on the minimum day schedule.

NOTE: Students must pass a minimum of five classes on a traditional schedule (or three classes on a block schedule) for credit, each semester, to meet extra-curricular eligibility requirements. (Students do not receive credit for classes audited.)

It is my understanding that participation in this program is a privilege for seniors and such privileges may be revoked at the discretion of the school administration. Participating students are subject to the same rules and regulations as full-time students, including disciplinary actions and extra-curricular eligibility.

Students must leave campus at the end of 6th period or 3rd block unless they have special permission from an administrator to remain on campus. Morning Minimum Day students may not be on campus prior to their first class of the day.

I have read the regulations and do understand and accept them as stated.

I do hereby give permission for _____
(PRINT STUDENT'S LAST NAME) (FIRST NAME)

to participate in the Minimum Day program. In signing this document, I accept full responsibility for my son/daughter when he/she is not attending his/her regularly scheduled classes.

DATE

PARENT/GUARDIAN'S SIGNATURE

STUDENT'S COBB
COUNTY ID#

STUDENT'S SIGNATURE

ADVISOR/COUNSELOR'S SIGNATURE