

## REQUEST FOR PART-TIME ATTENDANCE AT ROCK BRIDGE HIGH SCHOOL

It is the policy of the Columbia Public Schools to make allowances for all students to attend school on a part-time basis if their individual circumstances should deem it necessary.

A request for part-time attendance should be a planned part of a student's educational program and must be submitted prior to the beginning of the final semester that the student is in full-time attendance. The request for part-time attendance should be based on a plan to graduate in no more than the regular four-year school program.

Students approved for part-time attendance must have their class periods scheduled consecutively and will not be permitted to remain on school premises when they are not in class.



**Full-time enrollment status is required for students receiving Social Security benefits. Some insurance companies also require full-time enrollment status for insurance benefits/discounts.** It is up to the student and his/her family to determine whether or not their insurance company requires full-time enrollment status.

Students participating in activities sanctioned by the Missouri State High School Athletic Association (MSHSAA) must be enrolled in at least 3.25 credits during the semester of their activity or sport and have passed with a minimum of 3.25 credits in the prior semester.

***\*Full-time status is required for Valedictorian and Salutatorian eligibility. Students on a part-time schedule are NOT eligible for Valedictorian or Salutatorian honors.***

**\*\*Name on diploma and transcript will be the student's full, legal name. If you have questions concerning the student's name, contact the Counseling Office at (573) 214-3112.**

.....  
Date: \_\_\_\_\_

Student ID: \_\_\_\_\_

After reading the above part-time attendance policy, I request that \_\_\_\_\_  
be allowed to attend school on a part-time basis during the: (student name)

☐ 1<sup>st</sup> semester    ☐ 2<sup>nd</sup> semester    ☐ All year    of the \_\_\_\_\_ - \_\_\_\_\_ school year.

Their intended date of graduation is: \_\_\_\_\_.

The reasons for this request are as follows:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

\_\_\_\_\_  
(Student Signature)

\_\_\_\_\_  
(Parent Signature)

\_\_\_\_\_  
(Counselor Signature)

\_\_\_\_\_  
(Principal Signature)