# Virginia Department of Education Verified Unit of Credit Waiver Request Form for Transfer Students

The [*Regulations Establishing Standards for Accrediting Public Schools in Virginia*](https://www.doe.virginia.gov/home/showpublisheddocument/1220/637946439076470000), (8 VAC 20-131-5 et seq.) set the minimum standards for graduation from Virginia public schools. 8 VAC 20-131-60.G.1.d., and 8 VAC 20-131-60.G.2.d. of the standards read (in part):

*“Students transferring after 20 instructional hours per course of their senior or twelfth grade year shall be given every opportunity to earn a diploma following the graduation requirements prescribed in 8VAC20-131-50 for students entering prior to the 2021–2022 school year or following the graduation requirements prescribed in 8VAC20-131-51 for students entering in the 2021–2022 school year or thereafter. If it is not possible for the student to meet the requirements for a diploma, arrangements should be made for the student's previous school to award the diploma. If these arrangements cannot be made, a waiver of the verified unit of credit requirements may be available to the student. The Department of Education may grant such waivers upon request by the local school board in accordance with guidelines prescribed by the board.”*

## Submission Procedures:

This form, with the supporting documentation, must be submitted to the Virginia Department of Education by the division Superintendent for review and recommendation to the Board of Education no more than 90 days prior to the student’s anticipated graduation date. A separate package must be submitted for each student for whom a waiver is requested.

**Please include the following information in your submission packet:**

* Completed Waiver Request Form for Transfer Students with all signatures,
* Up-to-date student transcript (all courses transferred from sending school to Virginia transcript),
* Up-to-date student’s testing record (including substitute assessments), and
* Academic Career Plan

To protect student information, forms, transcripts, and other documentation should NOT be emailed. The completed form (with required signatures), transcript, and appropriate documentation shall be sent using the [Single Sign-On for Web Systems](https://p1pe.doe.virginia.gov/ssws/login_page.do) (SSWS) drop box to Sarah Bazemore.

**Emailed or incomplete documentation packets cannot be accepted for review by the VDOE Committee, and the waiver request will not be processed.**

## Technical Assistance and Support:

Please contact the Office of Policy with any questions regarding the regulatory requirements for graduation waivers at [policy@doe.virginia.gov](mailto:policy@doe.virginia.gov) or by telephone at (804) 225-2092.

For questions on the submission process or requesting a consultation meeting with VDOE staff, please contact Sarah Bazemore at [Sarah.Bazemore@doe.virginia.gov](mailto:Sarah.Bazemore@doe.virginia.gov) or by telephone at (804) 750-8183.

Questions about your SSWS account or help with any problems with the account can be addressed by your local SSWS Account Manager. They should be your first point of contact. Please refer to the SSWS Instructions located on the [SSWS Login Webpage](https://p1pe.doe.virginia.gov/ssws/login.do) for your local contact.

If the local Account Managers are unavailable, the DOE Data Services office will be able to provide assistance via email at [ResultsHelp@doe.virginia.gov](mailto:ResultsHelp@doe.virginia.gov).

## Verified Unit of Credit Waiver Request Form for Transfer Students

### Student Information:

Last Name:

First Name:

Middle Initial:

### School Division and School Information:

High School:

Address:

Telephone number:

School Division:

School Counselor:

School Counselor Email Address:

Principal:

Principal Email Address:

Division Point of Contact Submitting Waiver Request:

Division Point of Contact Email Address:

Superintendent:

Superintendent Email Address:

Previous School Name:

Date of Initial Enrollment:

### Waiver Request Details:

1. Please list the student’s verified credits and how they earned them (Standards of Learning Assessment, Locally Awarded Verified Credit, Substitute test, etc.).
2. Which graduation requirement(s) are being requested for this waiver?
3. Anticipate Graduation Date:
4. Please include an explanation of why this waiver is in the best interest of the student and their postsecondary goals.

### Documentation of Alternative Efforts:

1. When was the previous school contacted to request a diploma? What was the response and rationale for refusal from the previous school? Enter information regarding previous school contact, response, and refusal.

1. What efforts have been made by the local school board to assist the student to meet the requirement(s) prior to requesting the waiver? (Remediation efforts, retakes, accommodations, etc.). Describe efforts*.*
2. Did the student take advantage of each opportunity? Yes:  No:

If no, explain:        
Please describe any alternatives considered (if any):      

1. Did the student take end-of-course or other exit examinations at his/her previous school/state?  
   Yes:  No:   If yes, please list the name of the tests, and the results, including a description of performance level (e.g., pass, fail).

### Local Education Agency Approval of Waiver Request:

Date Approved by the Local School Board:

Name of Chairman of the Local School Board:

Signature Chairman of the Local School Board:

Date Approved by Local Superintendent:

Name of Superintendent:

Signature of Superintendent:

### Verification of Waiver Requirements

Please sign below to verify that that this waiver request is complete, including required documents, signatures, and that you have reviewed the information on pages one and two of this regarding the good cause waiver criteria and submission procedures.

**Please include the following information in your submission packet:**

* Completed Waiver Request Form for Transfer Students with all signatures,
* Up-to-date student transcript (all courses transferred from sending school to Virginia transcript),
* Up-to-date student’s testing record (including substitute assessments), and
* Academic Career Plan

Name of Division Contact Submitting Waiver:

Signature of Division Contact Submitting Waiver:

Date Completed and Submitted to SSWS Dropbox (Sarah Bazemore):

**Reminder: Emailed or incomplete documentation packets cannot be accepted for review by the VDOE Committee, and the waiver request will not be processed.**