

Minimum High School Program Opt-In Agreement

Student Name: _____

Campus: _____ District: _____

STUDENT

I have received written notice regarding the benefits of the Recommended High School Program and have chosen to follow the Minimum High School Program for graduation. I understand that I may, upon request, resume taking courses under the Recommended High School Program.

Signature of student

Date

PARENT OR GUARDIAN

I have received written notice regarding the benefits of the Recommended High School Program (RHSP). I agree that my child should follow the Minimum High School Program for graduation.

Signature of parent/guardian

Date

SCHOOL ADMINISTRATOR

I certify that _____ meets the following criteria for opting into the Minimum High School Program (check all that apply):

- The student is at least 16 years of age.
- The student has completed at least two credits required for graduation in each subject of the foundation curriculum under the Texas Education Code (TEC), §28.002(a)(1).
- The student has failed to be promoted to grade 10 one or more times as determined by the school district.

In compliance with TEC, §28.025, I have provided the parent/guardian a copy of the Notification of Benefits of the Recommended High School Program for Graduation.

In addition, I agree that this student should follow the Minimum High School Program for graduation.

Signature of school administrator

Date

Title