

Regents Examination Exemption Declination

Students Name:	Return to: (School to insert mailing address, email address and contact)
Student Date of Birth	Name of High School Student Attends:
Parent or Legal Guardian:	Daytime Phone:
Mailing Address:	Email Address:

List examinations required for graduation for which the parent/legal guardian declines the exemption:

Examination 1:	Examination 5:
Examination 2:	Examination 6:
Examination 3:	Examination 7:
Examination 4:	Examination 8:

Unfinished Requirements for Career Development and Occupational Studies

I decline all exemptions that my son/daughter is eligible to receive.

As identified above, I am declining the exemptions to the requirements for graduation available in school year 2019-20 as a result of the COVID-19 outbreak in New York State for my son/daughter,

_____.
Insert Student Name Above

I understand that this applies to all the Regents Examinations or their equivalents including unfinished requirements to earn the Career Development Commencement Credential or +1 Pathway, that my child was intending to take in June or August 2020 in a course for which my child has earned high school credit. By signing this form, I also understand that my child will remain eligible to receive a free public education until the end of the school year in which the child attains age 21, or until the child receives a high school diploma, whichever occurs first. In order to receive a diploma in the future, my child will no longer be eligible for such exemptions and must pass all applicable graduation assessment requirements.

Parent/Guardian Signature: _____ Date: _____