



Galt Joint Union High School District

SENIOR APPLICATION FOR SHORTENED SCHOOL DAY

****A copy of the Student's Transcript must be included with this application****

Current Juniors who are on track to graduate and who will need 60 or fewer credits to graduate upon completion of their Junior year, can make a request to have a shortened school day during part or all of their Senior year. All Seniors must be enrolled in a minimum of 6 courses, and must be scheduled for at least 3 periods (240 minutes) every day, unless that student is participating in Work Experience or is enrolled part-time in classes at a California Community College, California State University, or University of California, in which case they must be enrolled in at minimum of 4 courses, and must be scheduled for at least 2 periods (180 minutes) every day.

Name: _____ Student ID: _____ Date: _____
(Last Name) (First Name)

Age: _____ DOB: _____ Current Grade Level: _____ Current School Year: _____ Current GPA: _____

of days absent this school year _____

Are you on track to graduate? ☐ Yes ☐ No

Transcript must be provided

Will you have 60 or fewer credits left to earn at the end of your Junior Year? ☐ Yes ☐ No

Are you on track to complete the A-G requirements? ☐ Yes ☐ No

If no, what classes do you need to complete A-G _____

☐ I am a current Junior who has met the qualifications above and is requesting to have my school day shortened by one (1) period during my Senior Year.

I am requesting that my school day be shortened by eliminating ☐ First Period ☐ Fourth Period (select only one) from my schedule, during:

☐ Terms 1 & 2 ☐ Terms 3 & 4 ☐ ALL year

☐ I am a current Junior who has met the qualifications above and who will be participating in Work Experience or enrolled part-time in college courses at a California Community College, California State University, or University of California and is requesting to have my school day shortened by two (2) periods during my Senior Year.

Which of the following will you be pursuing?

☐ Classes at a Community College* ☐ Classes at a UC/CSU* ☐ Work Experience**

* Dual/Concurrent enrollment paperwork must be approved by the college and your principal and on file with your counselor. If you drop the course or fail to enroll, your shortened day will be revoked and you will have to attend school for the full day.

** You must be enrolled in Work Experience as one of your courses. This does not count as one of the required four courses you need to be enrolled in. If you drop Work Experience, or become unemployed, your shortened day will be revoked and you will have to attend school for the full day.

I am requesting that my school day be shortened by eliminating ☐ First & Second Periods ☐ Third & Fourth Periods (select only one) from my schedule, during:

☐ Terms 1 & 2 ☐ Terms 3 & 4 ☐ ALL year

If you already selected the 8 courses for next year, please indicate which electives you would like to drop:

Please note that shortened day privileges will be revoked if student becomes credit deficient and therefore is no longer on track to graduate.

_____ (initials) I understand that having a shortened school day will make me ineligible for Valedictorian, Salutatorian or top 10, unless I am dually enrolled in college courses or participating in Work Experience.

_____ (initials) If I requested to have a shortened day for all year, I understand that if this is approved for Term 1&2, the District will ask for verification of activities to continue authorization for Term 3 & 4 of senior year.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

Counselor Verification:

- ☐ This student is currently on track to graduate and have 60 or fewer credits left to earn at the conclusion of their Junior year.

If applying to have their school day shortened by two (2) periods:

- ☐ This student is either enrolled in Work Experience for their Senior Year or they have an approved dual/concurrent enrollment form on file in the Counseling Office indicating that they are/will be enrolled part-time in college course work at a California Community College, California State University, or University of California.

Counselor Signature: _____ Date: _____

This request for a shortened school day has been: ☐ Approved ☐ Denied

Administrator Signature: _____ Date: _____

Reason: _____

For Official Use Only:

Application Received: _____ Committee Date: _____ Approved: _____ Appeal: _____