



**Santa Barbara Unified**  
Every child, every chance, every day.

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## Parent/Guardian Request for Waiver of the High School Exit Examination Requirement for a Student with Disabilities

*Please return the completed form to the principal of your child's high school.*

My child, \_\_\_\_\_ [name] \_\_\_\_\_ is a student with disabilities attending \_\_\_\_\_ [high school] \_\_\_\_\_. He/she has taken the high school exit examination with modifications that alter what the test measures and has received the equivalent of a passing score on one or more parts of the exam.

I hereby request that the principal submit a request to the Governing Board for a waiver of the requirement that my child successfully pass the exit examination in order to receive a high school diploma. I understand that, in order to receive such a waiver, state law requires that my child have all of the following:

1. An individualized education program (IEP) adopted pursuant to the Individuals with Disabilities Education Act or a plan adopted pursuant to Section 504 of the Rehabilitation Act of 1973 that specifies the use of the modification(s) on the exit exam, standardized testing, or classroom instruction and assessments
2. Sufficient high school level coursework either satisfactorily completed or in progress in the district's high school level curriculum sufficient to have attained the skills and knowledge otherwise needed to pass the exit exam
3. An individual score report showing that my child has received the equivalent of a passing score on the exam while using a modification that fundamentally alters what the exit exam measures as determined by the State Board of Education

I hereby certify that, to the best of my knowledge, my child satisfies the conditions listed above.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Exhibit: SANTA BARBARA UNIFIED SCHOOL DISTRICT  
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