



**Student, Parents, or Guardian
Request for State Waiver/Variance Procedures
Marietta City Schools**

Waiver / Variance Requirements:

1. Determine if you are eligible to request a Waiver or a Variance for the GHSGT/ GHSWT by completing the appropriate state checklist.
2. Complete the information on this form and sign.
3. Send a formal letter of request for waiver or variance of the identified test(s) to the school superintendent of Marietta City Schools, 250 Howard Street, Marietta, GA 30060. Attach this form and the appropriate checklist to your letter. Note: If you are eighteen (18) years of age or older, you must personally make the request and sign all forms.
4. Your letter to the superintendent must specify the following:
 - *The rule(s) and requirements(s) being waived or varied, including the specific provisions and wording,
 - *The specific facts which would justify a variance or waiver for the student,
 - *The reason why the variance or waiver requested would serve the purpose of the underlying requirement, and
 - *Permission for department staff to receive all records, including special education, pertinent to the request.

System Criteria for Waiver/Variance Endorsement:

You must be able to check each of the items listed on the Waiver or Variance Checklist be considered for system support of your waiver / variance. See attached checklist.
(Refer to Georgia Department of Education State Rule 160-1-3-.09)

Application Information: (To be completed by student if he/she is 18 years of age or older.)

Student Name: _____ D.O.B _____

Last year attended: _____

I/We are requesting a waiver/variance for _____ (student name).

This waiver/variance is being requested specifically due to:

I/We understand that I/we must put this request in a formal letter to the School Superintendent following the state requirements listed above.

Parent Signature(s) Authorizing Release of Student Information: _____

Student Signature (if 18 years old or older): _____



**Georgia High School Graduation Tests (GHSGT)/
Georgia High School Writing Test (GHSWT)
Variance Checklist**

If you wish to be considered for a variance, you must be able to check each of the items listed below. If you have questions, check with your school counselor.

1. ___ I have attempted to take the relevant section(s) of the test four times.
2. ___ The most recent attempt of the relevant section(s) of the test is within the last calendar year.
3. ___ I have taken advantage of structured remediation after each unsuccessful test attempt.
4. ___ I have passed three of the five graduation tests (four content sections of the GHSGT and the GHSWT).
5. ___ I have met the attendance and course unit requirements for graduation (or am currently on track for completing such requirements).
6. ___ I have a 90 percent or better attendance record, excluding excused absences while enrolled in grades 9-12.
7. ___ I have obtained a scaled score that falls within one standard error of measurement (SEM) for passing the relevant section(s) of the GHSGT or GHSWT.
8. ___ I have successfully passed the End-of-Course Test(s) (EOCT) related to the section(s) of the GHSGT or the GHSWT in which the variance is being sought. (If an end of course test was not available for the course when you took it, the State Board of Education may waive this requirement).

If you feel that you are eligible for consideration of a variance of one or more portions of the GHSGT or GHSWT, you (or your parent/guardian if you are under the age of 18) must submit in writing to your local superintendent of schools a letter requesting consideration for a variance. In the letter, you must indicate the section(s) of the test for which you are requesting consideration and give permission for your local school system to release any records regarding the waiver request to the State Board of Education.

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**Georgia High School Graduation Tests (GHSGT)/
Georgia High School Writing Test (GHSWT)
Waiver Checklist**

If you wish to be considered for a waiver, you must be able to check at least one of the items in 1 and items 2 and 3. If you have questions, check with your school counselor.

1. ___ I have a disability that is documented in an Individual Education Program (IEP) that prevents me from passing a section of the GHSGT/GHSWT, and/or ___ I have a substantial hardship that is beyond my control that prevents me from passing a section(s) of the GHSGT/GHSWT.
2. ___ I have attempted to take the test four times with appropriate accommodations.
3. ___ I have taken advantage of structured remediation after each unsuccessful test attempt.

If you feel that you are eligible for consideration of a waiver of one or more portions of the GHSGT or GHSWT, you (or your parent/guardian if you are under the age of 18) must submit in writing to your local superintendent of schools a letter requesting consideration for a waiver. In the letter, you must indicate the section(s) of the test for which you are requesting consideration and give permission for your local school system to release any records regarding the waiver request to the State Board of Education.

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