

	7 th Semester High So	chool Waiver	
NAME: ID:			
ADDRESS: PHONE Home:			
ADDR	E33.	Work:	
		Cell:	
E-MAIL:			
OTHER NAMES WHICH MAY APPEAR ON ACADEMIC RECORDS:			
DOB:	(DOB optional to ensure accurate processing)		
*Fall Semester: August 1 st *Spring Semester: January 1 st *Summer I Semester: June 1 st *Summer II Semester July 1 st *Summer III Semester: June 1 st			
0	school transcript. Unless the official high school transcript has been received at the Office of Admissions and Record, before the PERC date of the semester that I will be attending.		
0	I understand that I will NOT be allowed to register for the next registration until my official High School transcript has been received and cleared.		
0	I understand that if I am receiving Financial Aid , future eligibility for aid cannot be determined until my admissions is complete.		
0	I understand that I am being allowed one semester with a copy of my Official 7th Semester High School transcript. I will provide an official transcript from the high school that I attended before the end of the semester.		
0	I understand that I am being allowed one semester with an O pending the graduation date only. I will provide the updated		
	High School	Date of Graduation	
STUDENT SIGNATURE:		DATE:	
OFFICE OF ADMISSIONS AND RECORDS USE ONLY:			
Received by: Date:			