# WCHS Early Graduation Request Log
## School Year: _____

**Date:** _____ **Person Submitting Report:** _____

| *(a) Student Full Name* | *(b) Date Early Graduation Requested* | *(c) Completed State & Local Requirements (note units needed as of 1st semester)* | *(d) Date Postsecondary Plans/Exit Meeting* | *(e) Principal's Recommendation/ Date* | *(f) Approved by Superintendent* |
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Superintendent's Signature

_____
Date