**Board of Education**

 Chair - Gail Ray

Vice Chair - Bill Johnston

Mike Benefield

Matthew Hobbs

Dr. Martha Smith

 **Haralson County Schools will be recognized as a leader in improving student achievement for ALL students.**

**O.C.G.A. § 20-2-281.1 PETITION FORM**

A individual (hereinafter referred to as “Student”) no longer enrolled in a Georgia public school and who previously failed to receive a high school diploma in this state or was denied graduation solely for failing to achieve a passing score on one or more portions of the Georgia High School Graduation Tests or its predecessor or the Georgia High School Writing Test or its predecessor may petition the local board of education in which he or she was last enrolled to determine the Student’s eligibility to receive a high school diploma pursuant to O.C.G.A. § 20-2-281.1 based on the graduation requirements in effect when the Student first entered ninth grade.

Submit this completed, signed form by mail or in person to the address below*.*  Incomplete information may delay processing. *(Note: If submitting a petition by mail, include a scanned/copied image of your government issued photo identification.)*

Annette Johnson

Haralson County School District

299 Robertson Avenue

Tallapoosa, GA 30176

**Primary Contact Information**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Name Phone Number Email Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Current Address

**Student’s name during high school**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
First Middle Last Suffix

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date of Birth Last 4 digits of SSN Gender Expected Year of Graduation

I verify the above information is complete and accurate.

Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR OFFICE USE ONLY**

 The Petitioner has met the requirements to receive a regular high school diploma.
 The Petitioner has not met the requirements to receive a regular high school diploma.

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Signature Position Date