

CERTIFICATE OF PROFICIENCY/HIGH SCHOOL EQUIVALENCY**NOTICE AND CONSENT TO DISCONTINUE SCHOOL ATTENDANCE
FOR STUDENTS WITH A CERTIFICATE OF PROFICIENCY**

Notice of Student Rights: Students who pass the California High School Proficiency Examination (CHSPE) and receive a Certificate of Proficiency issued by the State Board of Education may continue to attend school, but upon request will be exempted from compulsory school attendance pursuant to Education Code 48410. If the student is under 18 years of age, the student's parent/guardian must also provide approval in order for the student to discontinue school attendance.

If the student leaves school after receiving a Certificate of Proficiency and is under 18 years of age, the student may later decide to re-enroll in the district with no adverse consequences. In this case, the student may be required to meet new or additional requirements established since the student was previously enrolled. If the student re-enrolls and then leaves school again, the student may be denied re-admittance until the beginning of the following semester.

For further information about leaving school after obtaining the Certificate of Proficiency, contact the principal or school guidance counselor.

Student's name: _____

School: _____

Date on which the Certificate of Proficiency was issued: _____

To be completed by student: I understand the rights granted to students who are awarded the Certificate of Proficiency to disenroll from school, and to re-enroll if desired before the age of 18. I hereby notify the school district of my intent to disenroll from school.

Student's signature: _____ Date: _____

To be completed by parent/guardian: I hereby grant consent for my minor child to disenroll from school.

Parent/guardian's name (please print): _____

Signature: _____ Date: _____

To be completed by school administrator: I hereby verify the parent/guardian's signature and date recorded above.

**CERTIFICATE OF PROFICIENCY/
HIGH SCHOOL EQUIVALENCY (continued)**

AR 6146.2(b)

Name of school administrator (please print): _____

Position: _____

Signature: _____ Date: _____