Student First Name:	Student Last Name:
(Print name neatly)	

Franklinton High School Parent Permission Form (2025-2026) Request for Abbreviated Schedule-- For Seniors Only Submit to Student Services, or email your counselor

THIS FORM MUST BE RETURNED BEFORE A STUDE	ENT CAN BE SCHEDULEI GRADUATION	O FOR EARLY RELEA	ASE, LATE ARRIVAL, or EARLY	
Seniors must take at least 4 classes during their Ser		e, depending on t	otal credits).	
1 st Semester (must take at least 2 classes)	2 nd Sem	2 nd Semester (must take at least 2 classes)		
How many classes would you like to take?	How ma	How many classes would you like to take?		
Early Graduation (January 2026)	Do you	participate in scho	ol sports?	
(Must complete all graduation requirements and		Fall:		
have 26 credits by the end of Fall semester)		Winter:	Spring:	
 Only eligible seniors (with permission letters on Students must leave immediately from campus Students may not come to campus prior to their Students are responsible for being on time for complete *Please consult the High School Curriculum Guide and the state of the state	upon completion of their first class of the day with lasses and being aware	last class. hout prior permissio of all bell schedule	changes.	
Parent Signature	_	Date		
Student Signature	_	Date		
	Office Use Only			
Counselor Approval	-	Date		

Principal Approval _____