

Webster Groves High School
Application for a Shortened School Day

Students Name _____ Grade _____ Counselor _____

The legal school day is a six hour day “occupied in actual school work.” (Section 163.020 Missouri School Law). State school monies are granted to a school district on the basis of average daily attendance. A pupil who attends less than six hours can be counted only as a half-day pupil in the average daily attendance. Many pupils with a shortened day would place an undue expense upon the Webster Groves tax dollar. However, the more important consideration in every case is the school’s obligation to encourage full time attendance and satisfactory scholastic progress. Consequently, requests for a shortened school day must be based upon sound and valid reason always with understanding that satisfactory scholastic progress is maintained.

Requests for a shortened day due to problems of health must be accompanied with a doctor’s written recommendation.

Requests for a shortened day based upon need, to help with personal or family support, must clearly be explained below.

With my parent’s (guardian’s) consent I wish to apply for a shortened school day program for one of the following reasons (please check one):

Health _____ Justifiable Need _____ Employment _____ Dual Enrollment _____

Please explain briefly below:

Please indicate change of schedule required to accommodate this request:

I understand that in order to participate in extracurricular athletics and/or activities, I must be enrolled in 3.25 credits per semester and have earned 3.25 credits the previous semester.

*Eligible _____ *Ineligible _____ *Athletic Director Signature _____ Date _____

I understand that the student will not be allowed on campus during release time.

Student’s Signature and Date Parent’s/Guardian’s Signature and Date Phone Number

Employer Signature and Date Business Address Business Phone

(Please inform employer that you cannot work unless and until this application is approved.)

Does this effect enrollment status? No Yes (if yes, please fill out appropriate form.)

Successful completion of this shortened school day schedule will provide successful credit to meet Webster Groves High School graduation requirements.

Counselor Comment: _____

Counselors Signature and Date

Request Denied _____ Reason for denial _____

Request Approved _____ Information for clearing approval _____

Administrator Signature and Date

Place Completed form in Daphney Sumner’s mailbox

Date entered into schedule: _____

Cc: Counselors, please copy for student file

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