Bucyrus City School District

REQUEST FOR EARLY COMPLETION OF GRADUATION REQUIREMENTS

We, the undersigned, parents of	niel Campbell	give our permission
for Daniel Cumpbe	I and the second	
class of <u>2025</u>		
I do not desir activities.	e to have	participate in graduation
We also understand that it is our child's graduation in order to participate. * Signed	responsibility to find out and be at	~ ^
* Signed Student * Signed Parent	ell Date /0 -	
*Both Signatures Required		
Request Approved	Principal	LO LO 2 Date
Request Rejected		
BOARD	OF EDUCATION USE ONLY	
Approved	Rejected	Date
Superintender		Signature

8/22/08