

Intent to Graduate Form Summer 2020

A virtual Summer Graduation has been scheduled for Thursday, August 6, 2020. **To participate** in the Virtual All County Summer Graduation Ceremony I understand that I must:

Please initial acceptance of the following:

____ 1. properly fill out the form below and return it to the designated administrator **no later than** Wednesday, June 24, 2020.

____ 2. meet all the academic and service learning requirements as prescribed by the School Board of Broward County and the State of Florida by Thursday, August 6, 2020.

____ 3. **purchase a Summer Graduation cap, gown, medallion and tassel from Herff Jones**, located at 8230 State Road 84, Davie, Florida (954-693-0006) **prior to Monday, July 06, 2020**, at the special School Board rate of \$44.00 (**fully refundable** if you are unable to participate in graduation). After July 6th cap, gown, medallion and tassel may be purchased for **\$59.00** until **3:00pm, Thursday, July 23, 2020**, and are limited to "on hand" inventory.

Note: Caps/gowns purchased for June graduation are not acceptable.

Pick up for caps/gowns will be at Herff Jones on August 5th and 6th between 9am-3pm.

Name (**Print your name clearly** the way it should appear in the graduation program):

Last Name

First Name

Middle Initial

Student Number: _____

Home School: _____ **Summer School:** _____

____ I **intend** to participate in the summer graduation ceremony on August 6th. I understand that if I purchased or rented a cap and gown for June graduation, I cannot use it. **I must purchase a summer graduation** cap and gown from Herff Jones **no later than 3:00pm, July 06, 2020** in order to participate in the **smaller** Virtual All County Summer Graduation Ceremony.

____ I **do not** intend to participate in the All County Summer Graduation Ceremony on August 6th.

I have read and understand completely the above instructions and information. I understand that if I do not comply with the above instructions I am ineligible to participate in the All County Summer Graduation Ceremony.

Student Signature: _____ Date: _____

Attention: Adult and Community School Administrator, copies should be distributed immediately as follows:

ORIGINAL COPIES to: Home School

EMAIL copies to: Jennifer Hamilton – jennifer.hamilton@browardschools.com

PONY copies to: Jennifer Hamilton – Department of Athletics & Student Activities

****Due to limited time in the office, please scan all paperwork and send in one email, then send the copies in the pony, please.**