

George Jenkins High School
Graduation Ceremony Survey Form

Please complete and return to the Student Services Office (formerly the Guidance Office) by March 20, 2020

Print Student's Full Name: _____

Student ID#: 5300_____

_____ Yes, the above student will be participating in the graduation ceremony

_____ No, the above student will not be participating in the graduation ceremony. (Diplomas/Certificates will be available for pick up in Guidance the next working day.)

_____ Number of tickets requesting*

Special Accommodations (Please specify if applicable):

***Note: The number of tickets you have requested does not guarantee you will receive that amount. Once all forms have been submitted, the families will be notified of their ticket allowance.**

The week of April 6th, you will be able to find out how many tickets your family has been allotted. Beginning the week of April 13th, additional tickets may be requested through a form in Guidance, where you will be placed on a waiting list.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Received By _____ Date _____

(Please print name)