



K. Erik Swanson, Ph.D.
Superintendent of Education

GEORGE WASHINGTON HIGH SCHOOL

"Home of the Mighty Gecko Warriors"

Physical Address: 298 Washington Drive Mangilao Guam, 96913
Mailing: 501 Mariner Ave, Barrigada, Guam 96913
Telephone: (671) 734-2911 | Website: www.gwhsgeckos.com | Email: gwhs@gdoe.net

Accredited by the Western Association of Schools and Colleges, 2024-2030



Dexter Fullo
Principal

APPLICATION FOR UNSCHEDULED PASS

****ONLY SENIORS needing 5.0 credits or less to graduate are eligible for UNSCHEDULED PASS****

Unscheduled IDs are \$10.00 per semester. Replacement IDs are \$10.00.

Last Updated July 2024

Part-time enrollment at GWHS is a privilege, not a right. Allowance is considered for those students whose schedule fulfills required classes for graduation *and* meets one of the following criteria:

1. Concurrent enrollment in another educational institution
2. Employment
3. Parental Request

Additionally, participation in part-time enrollment requires that parent(s)/guardian(s) and student understand and agree to the following:

	I/We Agree to:	Parent/Guardian Initial	Student Initial
1	To be responsible for transportation to/from school.		
2	Be prompt for classes (11 minutes late = technical absence). Frequent tardiness may result in revocation of part-time enrollment.		
3	Leave campus immediately after class. Failure to leave campus after 2 nd warning will result in revocation of part-time enrollment.		
4	Not to be on campus during unscheduled period/s, unless authorized		
5	Wait for class in the designated area by the Main Office in the event of early arrival.		
6	Have the issued Unscheduled Pass at all times, ready to present to school personnel upon request.		

Any violation of this agreement will result in the following consequences:

1st Offense: Warning
2nd Offense: Loss of Privilege

Student Name	Date of Birth	Student #
I fully understand and agree to adhere to the conditions of part-time enrollment.		
<i>Student Signature</i>		

Eric Dela Cruz Christopher Castro Noshista Delgado Joni Serisola Lina Taimanglo
AP, Academic Affairs AP, Student Support AP, Special Programs AP, Student Life & Attendance Administrative Officer

Our Purpose is to Provide Our Students with the Skills and Knowledge they Need to Make Wise Decisions and Be Good Productive Citizens.



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Mother/Guardian Name:	Contact #:	Work #:
Father/Guardian Name:	Contact #:	Work #:

NOTICE TO PARENTS:

Parents have the option to have this section notarized/or to sign in front of an Authorized School Official. Please be sure to bring a valid ID for verification purposes.

PARENTAL CONSENT SECTION

I, _____, fully agree to conditions and policies regulating Part-Time Enrollment and give my consent to George Washington High School to issue an Unscheduled Pass to my child. Guam Department of Education assumes no liability for the time my child is off campus.

 Parent/Guardian Signature Date

 Authorized School Official's Signature

 Notary Public
 (In and for the Territory of Guam)

 Date

CLERICAL REVIEW:

Student Name: _____ Unscheduled Period(s): _____

Counselor: _____

Comments:

FOR SCHOOL OFFICE USE: This request is () APPROVED () DISAPPROVED

 Eric Dela Cruz, AP Academic Affairs

Eric Dela Cruz Christopher Castro Noshista Delgado Joni Serisola Lina Taimanglo
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