



**THE NEW YORK CITY DEPARTMENT OF EDUCATION**  
**ALTERNATIVE SCHOOLS AND PROGRAMS**

**Pathways to Graduation**  
90-01 Sutphin Blvd. – 2<sup>nd</sup> Floor  
Jamaica, NY 11435

Telephone (718) 557-2590

Fax (718) 557-2599

**P2G ASSISTANT PRINCIPALS' APPROVAL FORM**  
**FOR 17-YEAR-OLD COMPULSORY AGED STUDENTS**

Hub/Satellite Name: \_\_\_\_\_

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

OSIS #: \_\_\_\_\_

**Please list extenuating circumstances for the student to be admitted into P2G:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☆ Please note that a 17 year old compulsory aged student is defined as: “Any student who is born between July 1, 1996 and June 30, 1997.”

**I authorize the admission of the above student into the P2G Program:**

\_\_\_\_\_  
**Assistant Principal Signature**

\_\_\_\_\_  
**Date**