



PERKIOMEN VALLEY HIGH SCHOOL  
GRADUATION PROJECT

Approved by:

Date:

Mark the box indicating which type of project you intend to complete.

- CAREER FOCUS  
 CURRICULUM FOCUS \*  
 COMMUNITY SERVICE

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Homeroom Teacher: \_\_\_\_\_ HR #: \_\_\_\_\_ Class of 20\_\_\_\_\_

1. In a few detailed sentences, please explain your project and plan of action towards completion.

2. Why did you choose this particular focus?

3. What do you plan to learn from this experience?

4. How will completing this project be beneficial for your future?

5. Please provide 3 locations of where you might complete your project and the contact information:

Business Name: \_\_\_\_\_ Contact Info: \_\_\_\_\_

Business Name: \_\_\_\_\_ Contact Info: \_\_\_\_\_

Business Name: \_\_\_\_\_ Contact Info: \_\_\_\_\_

**\*If you are completing a Curriculum Project, please list the teacher and subject area above and ask that teacher to email Mrs. Colucci with their approval of your project idea/proposal.**

**This form is due during a student's sophomore year. Students are encouraged to start and complete their graduation projects before their senior year. More information is available online.**

Please see Mrs. Patti Colucci, Graduation Program Coordinator (Room 237) with any questions or concerns.

**Written Consent:**

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Parent: \_\_\_\_\_ Date: \_\_\_\_\_