

REQUEST FOR COURSE CHANGE 2017-2018

STUDENT: _____ GRADE: _____ DATE: _____

CLASS TO DROP/CHANGE

CLASS TO ADD

Is this course dual enrolled? YES NO

I UNDERSTAND THAT THIS REQUEST MAY CHANGE MY ENTIRE SCHEDULE.

Student's Signature

Parent's Signature

Requests for lunch/study hall changes must be accompanied by a medical note.
Requests for teacher changes (and reasons for your request) must be made in writing.

REQUEST FOR COURSE CHANGE 2017-2018

STUDENT: _____ GRADE: _____ DATE: _____

CLASS TO DROP/CHANGE

CLASS TO ADD

Is this course dual enrolled? YES NO

I UNDERSTAND THAT THIS REQUEST MAY CHANGE MY ENTIRE SCHEDULE.

Student's Signature

Parent's Signature