



## Request for Schedule Change Form 2017-18

Students, please follow your current schedule until you are notified that a change has been made. *If your schedule change request is approved, you are authorizing your counselor to change your entire schedule if necessary (including teacher changes) to accommodate your request. This also could mean that you have one teacher for the fall semester and a different teacher for the spring semester for the same course.*

- Priority schedule changes include: having a hole in your schedule, repeating a course you've earned credit in, and being enrolled in a course for which you do not meet prerequisites.
- When requesting a level change (moving from an Pre-AP course to a lower-level course), priority will be given to students failing the class.
- We will not overload classes to accommodate schedule change requests.
- Please print clearly. ☺

\_\_\_\_\_  
**Name** **Grade** **ID Number**

\_\_\_\_\_  
**Email address** **Phone Number**

**Explain your reason(s) for wanting this change** *(write on the back or attach a separate page if necessary):*

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

Course to be DROPPED	Course to be ADDED	Teacher Signature
		Student needs to turn in text book YES / NO <input type="radio"/> I approve this request <input type="radio"/> I do not approve this request

\_\_\_\_\_  
**Student Signature** **Date** **Parent Signature** **Date**

.....  
**FOR OFFICE USE ONLY**

Is a **participation fee** required? YES / NO  
Has the **sending teacher** been consulted? YES / NO  
Has the **receiving teacher** been consulted? YES / NO  
Would the change cause an **overload** in the new class? YES / NO

\_\_\_\_\_  
**Counselor signature** **DATE**