

Schedule Change Request Form

* This form is used after a student has started classes.

Attention Students and Parents

Students **MUST** follow their schedule the first day of school.

- 1.) All schedule change forms for **yearlong classes or first semester classes** must be submitted by the end of the **6th day of school**.
- 2.) **NO** yearlong or first semester classes can be added after the 6th day of school.
- 3.) Dropping a yearlong or first semester course after the 6th day of school will result in an **"F" for the course**.
- 4.) Second semester classes can be dropped or changed during the first **5 days** of the second semester. Dropping a second semester class **after the 5 days** will result in an **"F" for the course**.
- 5.) You must have 5 academic classes each semester. *This does not include Physical Education classes or Yearbook.* This is critical for all athletes!
- 6.) **This form must be signed by your parent and teacher prior to meeting with your counselor to drop the class.**
- 7.) You are expected to attend the classes on your original schedule until the official drop is completed by your counselor. You will be notified when this is complete. If you drop the course, it is your responsibility to return your book to the teacher or you will be charged for the book.
- 8.) Please note that academic fees may be adjusted as a result of your schedule change(s). You may receive a refund or you may receive an additional invoice.

Student Name _____ **Grade** _____

COURSE TO BE DROPPED

Course No.	Course Title	Teacher Signature	Text/ Materials Returned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

COURSE TO BE ADDED

Course No.	Course Title	Teacher Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

Athlete Alert: Before signing this form, please note that athletic eligibility requires a passing grade in 5 classes. ***This does not include Physical Education classes or Yearbook.***

Parent Signature _____

Date _____

Student Signature _____

Date _____

~~~~~  
**Counselor Notes**

Date of official drop \_\_\_\_\_

Counselor Signature \_\_\_\_\_

Schedule Change to Marcia \_\_\_\_\_ Refund \_\_\_\_\_ Additional Fee \_\_\_\_\_