

Request for Class Change Form

(For requests prior to school starting)

Student Name: _____ Date: _____

If you would like to request a change in classes please use this form. Please fill it out and return it by email to katiea@usd381.org or by taking it to the office. If sent by email from a parent no signature is required. I will assume the email is the parents' approval. Please submit any requests by August 10th. After that date you will use a different form requiring teacher signatures/approval.

Original Schedule Assigned:

1	
2	
3	
4	
5	
6	
7	

Requested Schedule:

1	
2	
3	
4	
5	
6	
7	

Please explain your reason for changing classes:

Parent's Signature: _____

The principal and counselor reserve the right to make the final decision on class changes.