

# REQUEST FOR COURSE/LEVEL REVIEW GRADE 9

If you feel an error has been made in your child's schedule, or if you feel there is a significant reason for a course adjustment, please complete this form and return it to the Main Office ***no later than 8:00 A.M. on April 3, 2019.*** Requests for review received after that time cannot be considered. Requests will be reviewed by the Vice Principal of Academics, the guidance department, and the department chairs and responses will be mailed to parents. If a course change is made, a new schedule will be emailed for your review and approval. **Please use a separate form for each requested course change.**

Student Name: \_\_\_\_\_ YOG: 2023

## Request to Drop Course:

Course Name: \_\_\_\_\_ Course #: \_\_\_\_\_

## Request to Add Course:

Course Name: \_\_\_\_\_ Course #: \_\_\_\_\_

## Reason for Request:

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

This portion is for Office use only.

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

## Comments:

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