## 2018-2019 CENTRAL HIGH SCHOOL SCHEDULE CHANGE REQUEST FORM



You may only use this form if you notice an error or problem with your schedule. For example:

\* Duplicate Class

31st to the Student Services Office.

\* Hole in Schedule

\* Missing Required Class

\* Wrong Level Class

\* Took Summer School Class

Student Name		ID #	Grade
Student Email	Student	Phone #	
Student Email Counselor (circle one) T. Sharp 9 <sup>th</sup> Grade	<b>K. Hurst</b> 10 <sup>th</sup> Grade	White 11 <sup>th</sup> Grade	<b>Montgomery</b> 12 <sup>th</sup> Grade
*Schedule Change Responses will	be emailed to student	and parent, so be	sure to check your email!*
Name(s) of the class(es) you wish (absolutely no teacher swa	ipping)	Period <b>R</b>	eason
<b>THREE</b> (s) of the possible options y		Period	
*Required - Parent Signature approving sched		*Required - Paren	at email and phone number
School Name	Class Title		Grado Farnod
Policy for Course Change and Course Drop have parental, counselor, and administrative ap or missing a required class. SECOND SEMESTIE Explanation required: Please explain the reas alter the periods, courses and teachers displayed if you provide sufficient information. Otherwise, writing, this request may be delayed. Follow you form no later than Tuesday, July 31st, 2018	c: Class changes and drops oproval. Valid reasons for common terms of the common terms	are only permitted wit lass change include inc MADE IN AUGUST ge request on the space. Your counselor may an appointment. <b>Prin</b> ou are notified that cha	thin the first week of school and must correct placement in a level (e.g. math e provided below. This change may be able to make a change immediately to make a change immediately to make a change immediately to make a change immediately. If we can't read your anges have been made. Turn in this
(Use reverse side if needed)			
Return this form before 3:45 on To	uesday July A	<b>dministrator:</b> Appr	rove Deny