Date Received: _____

Schedule Appeal Form 2019

Deadline to submit **completed** form to Student Services is **August 20, 2019**

Name:_____ ID#_____

I wish to drop: _____ and add: _____

Reason for Change:_____

Phone number:_____/ Email:_____

_____

Parent/Guardian Name/ Signature Date

_____

Student Name/Signature Date

Student initiated appeal requests will only be considered through August 20th. Schedule appeal requests will be considered in the order in which they were received. The only reasons to request a change are either a) you wish to increase rigor, i.e., honors, AP, IB. b) you attended summer school and need to have your course changed based on the courses you passed c) you are registered for a class which requires a prerequisite that you do not have or d) you have a hole in your schedule.

Changes will **NOT** be considered if any of the following situations occur:

1) It makes a class exceed the stated class cap.
2) It causes the number enrolled in a class to fall below fifteen.
3) It is a request to drop a career/technical class which completes a sequence.
4) It is a request to change teacher.
5) It is a request to drop an AP course.
6) It is a request to add a course that was not on your course request list.

All changes are final. There will be no additional opportunity for changes. Students will be notified that their request has been approved/denied by receiving a new schedule or notice on the first day of school.

Approved ☐ _____ Denied ☐ _____
(Counselor) *(Counselor)*

_____ _____
(Administrator) *(Administrator)*

_____ Reason # _____
Dail Midgette, Assistant Principal Denied _____ Approved _____