

Huron High School Schedule Change Request Form

Student Name _____ **Grade** _____

Phone Number _____ **E-mail** _____

Indicate Reason for Request: (Check one of the following)

Schedule changes will only be considered for the following reasons:

- Did not receive a course required for graduation.**
- Enrolled in a course you have already completed and received credit.**
- Enrolled in a course for which you have not met the prerequisite.**
- Do not have a full schedule of 6 classes.**
- Have a physical injury that does not allow participation in a class.**
- Took a summer school class.**
- Wish to increase rigor of schedule.**

Drop Course	Add Course	Alternate Choice

Parent Signature _____ **Date** _____

Student Signature _____ **Date** _____

- There will be no change made because you changed your mind about a course. One of the above reasons must be indicated and apply to your request. No changes are guaranteed, even if a teacher has agreed to a change.
- No phone calls or e-mails regarding schedule changes will be accepted.
- This form is only accepted through the first 2 A/B cycles in a semester. Any schedule change made after will need to be made with administration approval.
- Your schedule request may alter other periods, courses, and teachers displayed on your current schedule.
- Please print neatly. If we can't read your writing, this request may be delayed.

FOR OFFICE USE ONLY

Signature _____ Date _____