

**Department of Teaching and Learning
Office of Guidance Services and Student Records**

Request for Schedule Change Form

Date of Request: _____ **Student ID#:** _____

Student Name: _____ **Grade:** _____
Last First Middle

The following class schedule is requested:

DROP

ADD

REASONS FOR THE CHANGE REQUEST (Please check one):

- | | |
|--|--|
| <input type="checkbox"/> Failed prerequisite course | <input type="checkbox"/> Failed course |
| <input type="checkbox"/> Need course requested to graduate | <input type="checkbox"/> Does not have a complete schedule |
| <input type="checkbox"/> Other – Explain: _____ | |

All students are required to earn eight (8) credits each year.

The Virginia High School League (VHSL) rules specify that in order to participate in varsity athletics, drama, forensics, debate, or literary activities a student must have passed five (5) credits during the preceding semester and must be enrolled in five (5) credits during the current semester.

Signature of Parent/Guardian

Day Time Telephone Number of Parent/Guardian

Signature of Teacher

Signature of School Counselor or Administrator

Students are to remain in their present class until they receive official notification that a schedule request is approved.

**Summary of Decision
(Administrative Use Only)**

- Request Approved Request Denied Request on Hold

Summary Rationale of Decision: _____

Signature of School Counselor or Administrator