Waubonsie Valley Guidance Department ELECTIVE COURSE CHANGE REQUEST DEADLINE TO TURN IN THIS FORM TO YOUR CLASS HOUSE: MAY 24th



REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER.

REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER	Reason for Change(s):		
Parent's Signature: Contact Information: Parent's Daytime Phone #: Parent's E-mail: Waubonsie Valley Guidance Department ELECTIVE COURSE CHANGE REQUEST DEADLINE TO TURN IN THIS FORM TO YOUR CLASS HOUSE: MAY 24th REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER			
Contact Information: Parent's Daytime Phone #: Parent's E-mail: Waubonsie Valley Guidance Department ELECTIVE COURSE CHANGE REQUEST DEADLINE TO TURN IN THIS FORM TO YOUR CLASS HOUSE: MAY 24th REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER	Parent's Signature :		
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Waubonsie Valley Guidance Department ELECTIVE COURSE CHANGE REQUEST DEADLINE TO TURN IN THIS FORM TO YOUR CLASS HOUSE: MAY 24th REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER	Parent's Daytime Phone #:	Submitted on:	
Waubonsie Valley Guidance Department ELECTIVE COURSE CHANGE REQUEST DEADLINE TO TURN IN THIS FORM TO YOUR CLASS HOUSE: MAY 24th REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER	'arent's E-mail:	Completed on:	by:
ELECTIVE COURSE CHANGE REQUEST DEADLINE TO TURN IN THIS FORM TO YOUR CLASS HOUSE: MAY 24th REQUESTS FOR CHANGES WILL BE PROCESSED ON A SPACE AVAILABLE BASIS OVER THE SUMMER		Confirmation to par	rent: E Ph InP
	DEADLINE TO TURN IN THIS FORM T	ΓΟ YOUR CLASS HOUSE: <u>M</u>	AV 24th
Name Date Student ID # Class of 20	•		BASIS OVER THE SUMMER.
DROP: and ADD:	Name Date	Student ID #	BASIS OVER THE SUMMER Class of 20
Reason for Change(s):	Name Date	Student ID #	BASIS OVER THE SUMMER Class of 20
Parent's Signature :	Name Date DROP:	Student ID #	BASIS OVER THE SUMMER Class of 20
Contact Information:	Name Date DROP: Reason for Change(s):	Student ID # and ADD:	BASIS OVER THE SUMMER. Class of 20
Parent's Daytime Phone #: Submitted on: by:	Name Date DROP: Reason for Change(s): Parent's Signature :	Student ID # and ADD: For Office Use:	BASIS OVER THE SUMMER. Class of 20
Parent's E-mail: by: by: by: Completed on: by: by: by:	Name Date DROP: Reason for Change(s): Parent's Signature : Contact Information:	Student ID # and ADD: For Office Use: Submitted on:	BASIS OVER THE SUMMER Class of 20