

## 2015-2016 BHS Schedule Correction Form

Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_ Grade: \_\_\_\_

Your phone number: \_\_\_\_\_ Email (print clearly): \_\_\_\_\_

Counselor Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Steps to request a Schedule Correction:

1. Complete this form fully and legibly
2. Give the completed form to the counseling center secretary, counselor or administrator

**SCHEDULE CORRECTIONS WILL BE CONSIDERED FOR CORE CLASSES ONLY and elective classes that you did not request last spring. Please note that you are NOT ALLOWED TO CHANGE ELECTIVES THAT YOU REQUESTED LAST SPRING.**

If you are requesting a schedule correction you must meet at least one of the six criteria listed below. If your request does not meet any of the six criteria, do not fill out this form as your request will be denied. Please check the criteria that apply to your request.

### Reason for Schedule Correction Request:

- ☐ **Incomplete schedule.** 9<sup>th</sup> and 10<sup>th</sup> graders must be enrolled in seven classes and 11<sup>th</sup> and 12<sup>th</sup> graders must have a minimum of six classes.
- ☐ **Missing a course required for Graduation**
- ☐ **Prerequisite course not completed (or previously failed)**
- ☐ **Time conflict with a course taken at another school**
- ☐ **Scheduled for the same course twice**
- ☐ **Have already taken this class**
- ☐ **Did not request this class**

Class period and course requiring an adjustment: \_\_\_\_\_

Course that you are requesting be added to your schedule \*\*: \_\_\_\_\_

Course that you are requesting be dropped from your schedule: \_\_\_\_\_

**\*\* Please note that this course change may result in a change in your electives.**

*Office use only:* ☐ **accepted** ☐ **denied** Reason: \_\_\_\_\_

Completed by: \_\_\_\_\_ Action Taken: \_\_\_\_\_