

# Alpharetta High School Schedule Change Request Form



**PLEASE PRINT**

**Deadline to return signed form:** January 21, 2014 by 4:00 pm

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Grade \_\_\_\_\_

*(Legal First Name)*

Student's Email Address \_\_\_\_\_ Parent's Email Address \_\_\_\_\_

Home Telephone #: (\_\_\_\_\_) \_\_\_\_\_ Student's Cell Phone #: (\_\_\_\_\_) \_\_\_\_\_

**My counselor is (check the appropriate box):**

- |  |  |
|--|--|
| <input type="checkbox"/> Dee Webb (A – CONN)       | <input type="checkbox"/> Susan Chamberlin (MEF – R)  |
| <input type="checkbox"/> Keisha Iton (CONO – HI)   | <input type="checkbox"/> Karen Bolt (S – Z)  |
| <input type="checkbox"/> Amy Longstreth (HO – MEE) | <input type="checkbox"/> Clair Greenaway, Assistant Principal and Scheduler<br><i>(For special circumstances after student has consulted with counselor)</i> |

Students are expected to complete courses for which they have enrolled. The following **are not necessary** reasons for a schedule change (this list is not exhaustive): Requests to change teachers, specific periods, lunch periods, “change of mind”, failure semester 1 of a yearlong class, low grade, or electives (academic or non-academic) are not considered to be necessary. **Necessary changes include** (this list is not exhaustive) the addition of courses required for graduation, addition of courses required to fill empty periods, deletion of courses already completed, or deletion of courses “doubled up” during a specific period. Non-necessary changes will not be entertained unless there are extreme extenuating circumstances, in which case a request must be made in writing. If you have a “necessary” schedule change **as defined above**, please submit a detailed explanation of circumstances surrounding your request and turn it in **directly to your counselor. The form must be initialed and dated by your counselor upon receipt.**

The counselors and administrators will work diligently to make the requested schedule change, ***if it is “necessary” as defined above.*** If your request is both “necessary” and possible with class size, etc..., you will receive a new schedule by **Wednesday, January 22, 2014.** If your request is not for a reason specially mentioned above as “necessary”, we will return your form to you. In some cases a schedule change will not be possible because classes are full, prerequisites have not been met, or a scheduling conflict with another class would result. ***Please Note: Class schedules are tentative and subject to change due to class size limits and the leveling/balancing of classes, teacher and/or class changes to the AHS master schedule, and course revisions.***

Current Class \_\_\_\_\_ Change to: \_\_\_\_\_

**Reason for Change (Please check all that apply):**

- |   |  |
|---|--|
| <input type="checkbox"/> I have an incomplete schedule (“hole” in schedule).  | <input checked="" type="checkbox"/> I wish to change to a different elective <i>(see note above).</i>  |
| <input type="checkbox"/> I have already taken the class and passed it.  | <input checked="" type="checkbox"/> I wish to change to a different course level <i>(this must be a Teacher-initiated recommendation that does not require this form).</i> |
| <input type="checkbox"/> I have a duplicate course in my schedule.  |  |
| <input type="checkbox"/> I have not taken, or passed the necessary prerequisite.  |  |
| <input type="checkbox"/> I am a senior and need to make this change in order to fulfill graduation requirements.        |  |
| <input type="checkbox"/> I wish to change the level of a semester-long academic course, ex. econ to AP (explain: _____) |  |
| <input type="checkbox"/> Other (explain: _____)   |  |

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*Signature of Parent/Legal Guardian required for all schedule changes\*\*\***

*(For Office Use Only)*

**ACTION TAKEN:**     Denied (Reason: \_\_\_\_\_)     Changed Schedule

Current Class \_\_\_\_\_ Change to: \_\_\_\_\_

**Reason for Change (Please check all that apply):**

- I have an incomplete schedule ("hole" in schedule).
- I have already taken the class and passed it.
- I have a duplicate course in my schedule.
- I have not taken, or passed the necessary prerequisite.
- I am a senior and need to make this change in order to fulfill graduation requirements.
- I wish to change the level of a semester-long academic course, ex. econ to AP (explain: \_\_\_\_\_)
- \_\_\_\_\_ )
- Other (explain: \_\_\_\_\_)
- \_\_\_\_\_ )

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*Signature of Parent/Legal Guardian required for all schedule changes\*\*\***

*(For Office Use Only)*

**ACTION TAKEN:**  Denied (Reason: \_\_\_\_\_)  Changed Schedule

Current Class \_\_\_\_\_ Change to: \_\_\_\_\_

**Reason for Change (Please check all that apply):**

- I have an incomplete schedule ("hole" in schedule).
- I have already taken the class and passed it.
- I have a duplicate course in my schedule.
- I have not taken, or passed the necessary prerequisite.
- I am a senior and need to make this change in order to fulfill graduation requirements.
- I wish to change the level of a semester-long academic course I wish to change the level of a semester-long academic course, ex. econ to AP (explain: \_\_\_\_\_), ex. econ to AP (explain: \_\_\_\_\_)
- \_\_\_\_\_ )
- Other (explain: \_\_\_\_\_)
- \_\_\_\_\_ )

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*Signature of Parent/Legal Guardian required for all schedule changes\*\*\***

*(For Office Use Only)*

**ACTION TAKEN:**  Denied (Reason: \_\_\_\_\_)  Changed Schedule

Current Class \_\_\_\_\_ Change to: \_\_\_\_\_

**Reason for Change (Please check all that apply):**

- I have an incomplete schedule ("hole" in schedule).
- I have already taken the class and passed it.
- I have a duplicate course in my schedule.
- I have not taken, or passed the necessary prerequisite.
- I am a senior and need to make this change in order to fulfill graduation requirements.
- I wish to change the level of a semester-long academic course, ex. econ to AP (explain: \_\_\_\_\_)
- \_\_\_\_\_ )
- Other (explain: \_\_\_\_\_)
- \_\_\_\_\_ )

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*Signature of Parent/Legal Guardian required for all schedule changes\*\*\***

*(For Office Use Only)*

**ACTION TAKEN:**  Denied (Reason: \_\_\_\_\_)  Changed Schedule

