



St. Joseph High School

## SCHEDULE CHANGE REQUEST

- **Filling out this form does NOT guarantee a schedule change.**
- The reason for requesting a schedule change must be stated clearly and parental approval is required before a schedule change will be considered.
- A schedule change may change the order of your classes.
- Change requests for a different teacher, order of classes, or dropping a required class will not be considered.
- *Schedule changes must be requested within the first 5 days of school.*

\_\_\_\_ (initial) I understand the above guidelines and submit my request for a schedule change.

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Class to be dropped: \_\_\_\_\_

Class to be added: \_\_\_\_\_

Reason:

---

---

---

---

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Phone number: \_\_\_\_\_

---

\_\_\_\_\_ Schedule Change Approved

\_\_\_\_\_ Schedule Change Denied

Date: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Turn in all schedule change requests to Mrs. Piraino's office. Requests must be submitted within the first 5 days of school.