



Schedule Change Request Form

Date: _____

Student Name:	Grade:
Class to Drop:	Class to Add:

Reason for Change/Additional Comments:

Parent's Name (print)

Parent's Signature/Date

Counselor's Name (print)

Counselor's Signature/Date

Administrator's Name (print)

Administrator's Signature/Date

Schedule Changed in PowerSchool by: _____
(Data Specialist Name/Signature) (Date Changed)

- Approved
- Not Approved