

2020-2021 Schedule Change Form

- Complete this form to request a schedule change for the 1st semester.
- Schedule changes will ONLY be made during the second week of school (August 24-27).
- You are only <u>allowed to submit (1) request</u>.
- Please e-mail the schedule change to your grade level counselor:

	09 <u>Genie.Osor</u> 10 <u>Kelly.Renarc</u> 11 <u>Brandi.Aller</u>	io@browardschools.som d@browardschools.com @browardschools.com x@browardschools.com	
Student #	<u> </u>	Student Name:	Phone #
Direction	s: 1. 2.	Fill out the schedule change form completely. Save the form to the Desktop on your computer. a. Go to your email and attach the completed for b. In the Subject box- write your full name /curren Ex. John Does-Grade 10 c. Send the e-mail to your grade level counselor.	
Your schedule will only be changed for the following reasons:			
 ☐ I have previously taken and passed the course. ☐ I was misplaced in an academic class (Honors or Advanced Placement Course). ☐ I was incorrectly placed in a sequencing course. ☐ (Ex: Criminal Justice 2 but you've never taken Criminal Justice 1). ☐ Second chance: I'm retaking a previously failed class with the same teacher. ☐ Please note: A schedule change will not be made for the following reason: ☐ Elective changes 			
☐ Elective changes ☐ Teacher Preference			
If you did		a course card last spring, your schedule will not be cha	nged. Incomplete forms will NOT be processed.
1. I must t 2. I under	follow my curre	o while waiting for notification of schedule change requestread in the schedule until my counselor calls or emails me. NO GUARANTEE the schedule change will be done and,	est? therefore, I need to follow my current schedule and do ALL
	Term	Class(es) YOU want to Drop	Class(es) YOU want to Add
6			
6			
Required	Signature:		
Student Signature: Date:			
*** For School Use Only-Do Not Write Below Line*** Schedule Change Approved: Schedule Change Denied (Reason):			