ADLAI E. STEVENSON HIGH SCHOOL COURSE DROP REQUEST

NAME	ID NUMBER	GRADE
COURSE NAME		
TEACHER		
REASON FOR REQUEST		
 2020 remote learning. Students who drop a class (withdraw with a failing grade point average. Please note that if students eligible to participate in ath 	m a course until October 8, 2020 description after this time period will recede) and will have the failing grade of drop below five classes in a semest	ive a grade of WF calculated into their ter, they may not be
STUDENT SIGNATURE		DATE
PARENT SIGNATURE	ī	DATE

Email this form to your counselor when it is complete.

Steps:

- 1. Student sends drop form to counselor w/ student & parent signature.
- 2. Counselor connects w/ student to discuss implications for graduation requirements & post-secondary plans.
- 3. Counselor forwards form to teacher and copies the student.
- 4. Student and teacher connect about the drop.
- 5. Teacher forwards the form to their director and copies the counselor.
- 6. Director reviews form, connects w/ others if needed, and reaches out to counselor.
- 7. Students must maintain their current schedule until communicating with their counselor to process this change.