

Course Request Change Form

Name: _____ Student ID#: _____

Grade: _____ Homeroom: _____

REQUEST To

ADD: Course# _____ Title: _____

Reason: _____

Teacher Signature: _____ Date: _____

Parent Signature: _____ Date: _____

REQUEST To

DELETE: Course# _____ Title: _____

Reason: _____

Teacher Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Deadline for all changes is: April 8, 2021

Return this form to the CVHS Guidance Office.

Date Received: _____ Date Processed: _____

Counselor Signature: _____