



Nonnewaug High School

5 Minortown Road
Woodbury, CT 06798
Telephone Number (203) 263-0253
Fax (203)263-6928

COURSE LEVEL OVERRIDE FORM

- Check applicable category: Incoming grade 9 student
 Current NHS student

This change form must be completed, signed and returned to the student's school counselor.

Student Name: _____ YOG: _____ Date: _____

Course/level recommended by teacher: _____
Course name/ level

Course level change requested: _____
Course name/ level

To Student & Parents,

When parents and a student request to override a teacher recommendation, they must understand that, should the need arise, it may not be feasible to move the student to a lower/higher level without a complete schedule change or course withdrawal of an elective class.

Parent Signature: _____ Date: _____

Comments: