

Randolph High School – School Counseling Department

Counselor: _____
Date: _____

PARENT/GUARDIAN REQUEST FOR ALTERED ACADEMIC PLACEMENT

Student Name: _____

Recommended Course Title and Level: _____
(Only use course title and level found in the curriculum handbook)

New Course Title and Level: _____
(Only use course title and level found in the curriculum handbook)

*****APRIL 24th, 2023 – Academic Waiver Deadline *****

All waivers submitted on or before this date will be honored if space allows in the requested course.

I acknowledge I have requested the course placement stated above and I have done so contrary to the recommendation of the educational professionals at Randolph High School. Since an educational professional’s recommendation is based upon the student’s performance in class and an assessment of that student’s ability to be successful, a placement in a higher-level class may result in a student struggling and potentially not being successful in the requested placement.

In order for this waiver to be processed, the student must complete and **submit with this waiver form**, a written/typed rationale that completely addresses the following items:

1. Discuss in detail the areas described by your current teacher that form the basis for not recommending the higher level.
2. Discuss in detail your reasons for seeking this waiver despite your teacher’s recommendation.
3. Describe your plan for how you will be successful in the higher-level course.

I understand, should this waiver be granted, there may not be an opportunity to move classes again due to class sizes. Any student who has waived into a higher-level course and earns a D+ or lower at the end of the first marking period will be moved to a lower-level course pending availability and if space allows. If a student is moved to a lower level, other changes might occur to that student’s schedule to facilitate the course change.

I further understand if there is movement from an honors level to a different level, the weighting applied to the grade point average is the weight associated with the completed class. Furthermore, all earned assignment grades will be transferred to the new class.

I recognize this placement is being made solely to accommodate my request.

Parent/Guardian signature indicates responsibility for this placement. Please submit this form and the accompanying rationale to the school counseling services department.

Parent/Guardian: _____ Date: _____

Student Signature _____

School Counselor: _____
(Please provide your school counselor’s name)

Case Manager: _____
(If student has an IEP, please provide your case manager’s name)

After submitting the form, the school counselor will process the request and the schedule change, if space allows.