

King Middle School

Schedule Change Request

Student Name _____ ID#: _____ Grade: _____

Before submitting this form to Student Services *please*:

- Contact the teacher directly to express your concerns
- Remember changes are made to balance classes and to properly place students by ability
- Allow time for your child to adapt to their schedule

Examples of student requests for schedule changes that **do not** meet King Administrative Policy:

- Same subject from a ***different teacher*** or same teacher at a ***different time*** period
- Student being placed in classes with friends
- Rumors regarding a specific teacher
- "Personality conflict" with the teacher
- Student's learning style and teacher's teaching style do not match

It is King Administrative Policy ***that parents contact teachers directly to discuss difficulties being experienced by their student.*** In most cases this is sufficient.

____ **Please check:** *I have followed the above steps and am now submitting this request for review.*

Parent signature

Date

Please briefly describe the nature of your concern:

RESULTS Date: _____
