

International Baccalaureate Programme Course Change Request updated 01/13/20



Name: _____

Student ID: _____

IB Diploma

Graduation Year: _____

IB Honors

Policy Regarding an IB Schedule Change: When a student forecasts for an IB DP course, they are expected to complete the entire course, whether it is one or two years in duration. Some exceptions can be made on an individual basis and require the student to proceed through the IB course change request process outlined below. If a student's request is approved, and the student has already registered for a May exam in that course, payment for that exam will still be required and collected according to the student's payment plan as determined at the time of registration.

IB DP Course and Level: _____

Period: _____

Student is registered for May exam in this course

Change Requested

Level change: to _____

Drop course

THIS FORM MUST BE COMPLETED IN THE ORDER LISTED BELOW:

1. Teacher/Student Partnership

The student and I met and made a plan to encourage success in the class. The details of that plan are *on the back side of this sheet*.

The student is unable to meet our plan for success (*see over*) for the following reason(s):

Teacher Signature: _____

Date: _____

Current Grade: _____

2. Student/Parent/Guardian Communication

I have spoken with my student and I believe they are unable to continue in the IB class for the following reason(s):
(*please be specific; if no comments are made, the form will be returned to the student*)

Parent/Guardian Signature: _____

Date: _____

3. Student/IB Coordinator Meeting

IB DP Coordinator Signature: _____

Date: _____

Notes:

4. Student/Admin. Meeting (as requested by IB Coordinator)

Notes:

Contacted teacher

Contacted parent/guardian

Contacted Coordinator

Transcript Grade (If past two week drop window, circle one):

W/P

W/F

Administrator Signature: _____

Date: _____

SUCCESS PLAN: Student and teacher must meet, determine and document a plan for success, and sign below confirming their agreement. This step must be completed before proceeding with the Course Change Request.

Student Concern (can be filled out with support from Counselor):

Teacher Response:

Plan for Success:

(What tactics will you both employ? What supports will you use? *Be specific here.*)

Resources Available:

Timeline for Re-evaluation:

(On what date, or by what point in the above plan, will teacher and student meet to re-evaluate the student's ability to be successful in the course? *If unsuccessful*, the student may pursue the Course Change Request.)

Teacher Signature: _____

Date: _____

Student Signature: _____

Date: _____

Current Grade: _____