

Student Class Change Request Form



Please fill out this form in its entirety to request a class change. You will be contacted by guidance if this change may be possible to accommodate.

If we are unable to change your class, we will notify you of this by returning this form to you via your homeroom teacher.

Name: _____

Date: _____ Time: _____

WITHDRAWAL (current class you wish to withdraw from):

Class(es) including days/hour: _____

Reason for request:

ADDITION (class you wish to add):

Class(es) including days/hour

GUIDANCE:

Approval _____ Not Approved _____

Comments:

Please be aware that REQUESTS ARE NOT GUARANTEED and are subject to many factors including student's education plan and class size. If you have any questions, contact jalmeida@my-fca.com.

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