



# FORT DORCHESTER HIGH SCHOOL OVERRIDE FORM

FOR USE IN OVERRIDING A TEACHER RECOMMENDED COURSE

This form should be returned along with student's verification sheet during the pre-registration period.  
**OVERRIDES WILL NOT BE ACCEPTED AFTER MAY 1<sup>st</sup>, 2025**

Students Full Name: \_\_\_\_\_

Current Grade: 8 9 10 11 12

I have thoughtfully considered my child's course selections and current academic performance, and I would like to OVERRIDE the following TEACHER-RECOMMENDED course(s). ***I understand that by overriding a teacher-recommended course, I am agreeing that my child will remain in the replacement course(s) for the entire year regardless of his/her progress.*** I understand that I cannot override a pre-requisite course. I understand that I may be contacted to discuss this decision.

Teacher-Recommended Course	Desired Replacement Course	Parent Signature (*required for EACH requested course change)
		*
		*
		*
		*
		*

**Parent/Guardian Contact Information:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Cell Number

\_\_\_\_\_  
Work Number

\*\*\*\*\*FDHS Office Use Only\*\*\*\*\*

Counselor/Administrator \_\_\_\_\_

Date: \_\_\_\_\_

Administration:    Approved                  Disapproved

COMMENTS:

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## HOME OF THE PATRIOTS

The Mission of Fort Dorchester High School is to prepare **all** students for college and careers by providing a world-class educational experience.