

# Schedule Change Request Form

Brunswick High School

Return completed and signed form to the Counseling Office.

*Requests to change your schedule are limited to the first **five** days of the semester.  
Schedule Change Requests Forms can only be submitted through **Tuesday, August 23, 2022***

Name \_\_\_\_\_ Grade \_\_\_\_\_

## **Schedule Change Priorities -- Please circle ONE:**

1. Course sequence or prerequisite concerns (ex: Spanish 1 must be taken before Spanish 2)
2. Academic level corrections or changes (ex: Honors or on-grade)
3. Balance concerns (ex: too many academic courses in one semester)
4. Reschedule to take a failed class

The following are some, but not all of the reasons a change will be denied:

1. Request for another teacher.
2. The requested course is closed.
3. Class will result in eating on a different lunch shift.
4. Changed mind about a class.

\*\*Elective changes are probably NOT possible due to staffing allocations.

I would like to **DROP** the following class(es):

\_\_\_\_\_

I would like to **ADD** the following class(es):

\_\_\_\_\_

Please explain how this change will improve your educational program:

\_\_\_\_\_  
\_\_\_\_\_

## **PARENT APPROVAL:**

I have discussed this change with my child and approve of their request.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent cell / work number

\_\_\_\_\_  
Student cell number

\_\_\_\_\_  
\*Assistant Principal Signature

\_\_\_\_\_  
Date

**\*Only required if requesting to drop an AP or Dual Enrollment course.**