

Todav's date:

## ST. THOMAS HIGH SCHOOL Request for Course Change 2024-25

One form per student ONLY – Do NOT submit duplicate requests!

## Requests will be considered for VALID EDUCATIONAL REASONS ONLY

**EXAMPLE**: 1st priority **>** Pass/failure in an ACADEMIC course

2nd priority → Incorrect placement in an ACADEMIC course

3rd priority → Requesting change of OPTION

\*\*\* PLEASE NOTE: We will NOT consider requests based on your preference of teacher \*\*\*

- 1. Complete the *Request for Course Change* form.
- 2. Be sure to include a *signature* from your parent/guardian.
  - → BE SPECIFIC State which course(s) you wish to drop / add, AND give reasons (see page 2).
- 3. Return the completed form to the Guidance department *no later than FRIDAY, SEPTEMBER 13*.
- 4. Changes are made on a PRIORITY basis (see above) and may take one week or more to complete.
- 5. You will be advised if we cannot accommodate your request.
- 6. Continue to follow your current schedule UNTIL you receive a new one from the Main Office.

## \*\*\* IMPORTANT NOTE \*\*\*

- → In order to make the change(s) requested, ONE OR MORE OTHER COURSES MAY BE AFFECTED.
- → IT MAY NOT BE POSSIBLE to revert to your original schedule after the requested changes have been made.

Student name (please PRINT clearly – first AND las	et name): Grade:
·	
Signature of parent/guardian:	Phone number:
Parent's email address:	
Course(s) you wish to DROP:	
1.	3.
2.	4.
Course(s) you wish to ADD:	
1.	3.
2.	4.

REASONS for your request:	
,	
DECOMMENDATION ( O .: I D	
RECOMMENDATION from Guidance Department:	
ADDITIONAL COMMENTS:	
	_