

WEST HARTFORD PUBLIC SCHOOLS

SCHEDULE CORRECTION FORM - Summer

If a student has a request for a schedule change or adjustment outside of the school year, **this form should be completed and returned by mail or in person to the school counseling office - Email requests will not be processed.** Basic change requests that can be addressed by Administrators over the summer will be processed upon receipt. More complicated requests that may affect student core academic courses, progress towards graduation, or involve a level placement appeal, will not be addressed until the week of August 17 when counselors begin to return to offices.

Student name: _____

Grade: _____

Counselor: _____

Date: _____

I would like to ADD the following class: _____

I would like to DROP the following class: _____

***A class drop is possible if the student is carrying the required credits for full-time enrollment status**

I would like to request a level change in the following class: _____

***Please also complete a Course Selection Level Placement Appeal form**

1. Student Signature: _____ ***Required**
Reason for request:

2. Parent Signature: _____ ***Required**
Comments:

For Office Use Only:

Counselor signature for approval: _____ Date: _____

Administrative signature for approval, as needed: _____ Date: _____