

Walton Virtual School
REQUEST FOR SCHEDULE CHANGE

If you have a valid reason for changing your schedule, complete this form and return it to Walton Virtual School. Please note that submission of the form does not guarantee that your schedule will be adjusted.

Your parent's signature is required before we make any changes to your schedule.

Your schedule will not be changed because you would prefer a different teacher.

You must continue to attend the classes on your current schedule until you receive confirmation from Walton Virtual School of a schedule change.

Please **print** all information.

Please read the directions carefully, incomplete forms will not be processed

Name _____

Grade Level _____

Dropping courses:

The following courses are not allowed to be dropped from your schedule, unless you have already earned the credit or have special circumstances (dual enrollment, etc.):

6th grade: ELA, Math, Science, Social Studies, Physical Education

7th grade: ELA, Math, Science, Social Studies (Civics), ½ year of Physical Education

8th grade: ELA, Math, Science, Social Studies, Career Research

9th grade: English 1, Math (algebra 1, geometry), Science

10th grade: English, Math, Science, Social Studies (World History),

11th grade: English, Math, Science, Social Studies (US History)

12th grade: English, Math, Social Studies (US Gov/Econ)

All grades: Intensive Reading, Learning Strategies, Critical Thinking, HOPE

List the course(s) you want to DROP.

Reason for request (check one)

	<input type="checkbox"/> I have already earned credit in this course. <input type="checkbox"/> I am scheduled for a dual-enrollment course during this block. <input type="checkbox"/> I have a blank in my schedule. <input type="checkbox"/> I need this for graduation. <input type="checkbox"/> I would like to increase my level of rigor in this course. <input type="checkbox"/> Advanced <input type="checkbox"/> Not Advanced
	<input type="checkbox"/> I have already earned credit in this course. <input type="checkbox"/> I am scheduled for a dual-enrollment course during this block. <input type="checkbox"/> I have a blank in my schedule. <input type="checkbox"/> I need this for graduation. <input type="checkbox"/> I would like to increase my level of rigor in this course. <input type="checkbox"/> Advanced <input type="checkbox"/> Not Advanced

List the course(s) you want to ADD.

Reason for request (check one)

	<input type="checkbox"/> I failed this required course and need to re-take it. <input type="checkbox"/> I requested this course on my registration form. <input type="checkbox"/> This is a prerequisite to a course I want to take later. <input type="checkbox"/> This course is required for admission into college. <input type="checkbox"/> Advanced <input type="checkbox"/> Not Advanced
	<input type="checkbox"/> I failed this required course and need to re-take it. <input type="checkbox"/> I requested this course on my registration form. <input type="checkbox"/> This is a prerequisite to a course I want to take later. <input type="checkbox"/> This course is required for admission into college. <input type="checkbox"/> Advanced <input type="checkbox"/> Not Advanced

Student Signature _____

Date _____

PARENT SIGNATURE SECTION (REQUIRED FOR ANY CHANGES TO BE PROCESSED):

I have discussed this schedule change request with my child and agree with the request.

Parent/Guardian Signature _____

Date _____