## Centerville High School Level Change Request Form Return this form to the counselor for seat availability

A level change request may originate with a student, teacher, or parent. Guidelines to consider when requesting a level change should include the student's current grade, test scores, teacher observations, etc. This form will be submitted to the guidance counselor when the necessary signatures have been acquired.

	Window 1 - The first 5 school da Window 2 - The first 10 school d Window 3 - The first 5 school da <b>NO LEVEL CHANGES U</b>	days of 3 <sup>rd</sup> quarter. ays of 4 <sup>th</sup> quarter (semester co INTIL AFTER FIRST QUART	ER.
Level Change requested by:	□ Parent/Guardian	□ Student	□ Teacher
Course Change Requested: fro	m Course Name	to	Course Name
Student Name:		Grade:	Unit: ID:
Parent/Guardian Name:	Parent/Guardian Email:		
Teacher Name:	Teacher Email:		
Student Signature: TEACHER: Please express in v			Date: progress of the student in the class:
Current Class Grade: Teacher Signature:	_	Ū	□ I do <u>not</u> recommend the change. <b>Date:</b>
PARENT/GUARDIAN: I have re teacher and/or counselor and a		le and teacher comments	s. I have also communicated with the
Parent/Guardian Signature:			Date:
OFFICE USE ONLY: Counselor	Signature:		Date Processed: