



Queen's Grant High School  
Schedule Change Request Form

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Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Please complete this form if you have a change request that fits within the QGHS schedule change policy. No changes will be allowed unless they are deemed necessary by the school. Please be aware that some changes may not be possible. **Note: WE DO NOT MAKE TEACHER CHANGES.**

**Summer School Credits:** Schedules will automatically be adjusted once we receive proof of the credit in the counselor's office. You do not need to fill out a schedule change request form.

**Necessary changes fall into the following categories:**

(Please check those that apply to your request and provide an explanation.)

\_\_\_\_\_ 1. I have no schedule.

\_\_\_\_\_ 2. I have an incomplete schedule. Explain:

\_\_\_\_\_ 3. I don't have a course that I need for graduation. Explain:

\_\_\_\_\_ 4. I don't have the prerequisite for a course on my schedule. Explain:

\_\_\_\_\_ 5. I have already passed and received credit for a course on my schedule. Explain:

\_\_\_\_\_ 6. I would like to move to a different level of this course. Explain:

\_\_\_\_\_ 7. I am a senior requesting early release/late arrival or concurrent enrollment. *Must have an early release/late arrival form on file or attached to this request or supply copy of enrollment in Community College Courses.* Explain:

**For the reason checked above, I am requesting the following schedule change:**

**DROP:** \_\_\_\_\_ **ADD:** \_\_\_\_\_

**DROP:** \_\_\_\_\_ **ADD:** \_\_\_\_\_

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

Office Use: \_\_\_\_\_ Approved \_\_\_\_\_ Denied Signature: \_\_\_\_\_ Date: \_\_\_\_\_