

Collins-Maxwell High School

Add/Drop Form Grades 9-12

Name of Student: _____ Grade: _____

Date: _____

Proposed Modifications

Period	Dropping	Teacher	Adding	Teacher
1				
2				
3				
4				
5				
6				
7				
8				

Reason(s) for change: _____

- Obvious errors or omissions of selected or required courses
- Having more than one daily study hall
- Correction due to failure of a course
- Completion of a summer school course
- Have not met prerequisites for a class
- Exceptional circumstances approved by counselor

Recommended by: _____ Signature: _____

Changes in your class schedule must be approved by your parents.

Parent Signature & Date

Approved by Guidance Counselor: _____ Parents notified (date): _____