

**2016-17 School Year SCHEDULE CHANGE REQUEST  
DUE Monday, June 20, 2016 to Front Office**

**Student's Name** \_\_\_\_\_

**Grade** \_\_\_\_\_

**DIRECTIONS:**

- Please list the course that you are dropping and the course that you want to add. Certain honors and AP courses have summer assignments.
- If you are adding a class that has summer work, please have it completed by the first day of school. All Summer Assignments are posted on [www.cambridgehs.org](http://www.cambridgehs.org)
- If changing a course level or core class, please check the Fulton County Guidelines for Course Placement posted on <http://school.fultonschools.org/hs/cambridge/Pages/Academics.aspx>. If you do not meet the county guideline then please fill out a Course Waiver form and attach to this form. Form is available on the site listed above.
- Ensure that the class schedule comes out to 6 classes each semester equaling 6 credits.
- If adding an online class through Fulton or Georgia Virtual, please go to the respective program's website and register for the course. The school cannot enroll you. In addition list which period you want the class taken Off-campus, 1<sup>st</sup> or 7<sup>th</sup> period.
- No changes to the class schedule will be honored after the June 20<sup>th</sup> deadline.

**What course change are you requesting?**

I want to **DROP** the following class: \_\_\_\_\_

I want to **ADD** the following class: \_\_\_\_\_

I want to **DROP** the following class: \_\_\_\_\_

I want to **ADD** the following class: \_\_\_\_\_

**Parent/Guardian signature is required for ALL schedule change requests:**

\_\_\_\_\_  
Parent/Guardian's signature

\_\_\_\_\_  
Parent/Guardian's printed name

\_\_\_\_\_  
Parent/Guardian's email

\_\_\_\_\_  
Parent/Guardian's Phone number

\_\_\_\_\_  
Date of request

**OFFICE USE ONLY: Date Form Received** \_\_\_\_\_