

Fossil Ridge Intermediate School

Class Change Request

Student Name: _____ Date: _____ Grade _____

Parent Name: _____ Phone: _____

Step 1: Complete the FRIS Schedule Change Request Form (google form) to reserve your spot in line.

Step 2: Complete **THIS form** completely and return it to the Front Office

Please Note:

- Requests will be processed in the order they are received.
- Because of the limited number of courses, changing one class may impact your entire schedule.
- If class changes are approved, a **\$10.00 fee** will be required. Once the fee has been paid, changes will be made to your PowerSchool. Without payment, the class changes will not take place.

Drop these Classes...			Add these Classes...	
Period	Class Name	Teacher Signature	Class Name	Teacher Signature

By signing below, I acknowledge and understand:

- changes are dependent on other factors, including class size and class availability,
- the school may determine that the change I want could have a negative impact on the rest of the school and will, therefore not be done.
- I understand that class changes are not made to choose a particular teacher or to be with friend(s).
- I also understand that the schedule may be changed back to my previous schedule if I do not exemplify positive behavior in my new class.

Student Signature: _____

Parent Signature: _____

For Counselor Use ONLY:

Class Change Approved: YES / NO

Counselor Signature: _____

Counselor notes: _____