

NANUET SENIOR HIGH SCHOOL
PLACEMENT CHANGE FORM

Your son/daughter was recommended by his/her teacher(s) for the following course:

You have requested the following course:

Student section: Please sign below if you wish to override the recommendation.

Student's Name: _____
(Please Print)

Student's Signature: _____ Date: _____

School counselor section: To be completed prior to parent/guardian signature.

Current course in academic area: _____

Mid-year average in current course: _____

The school's placement recommendation has been based upon academic performance throughout the school year. Your child's current academic teacher feels that the original recommendation is in his/her best interest in order to ensure academic growth and success in the upcoming year.

We recognize your prerogative, as a parent/guardian, to request a different program. In order to do so, it is recommended that you discuss this matter with your child's teacher and/or counselor. Our goal, of course, is to work with you in order to ensure the best possible academic year for your son/daughter.

In the event your child drops the course listed above, every effort will be made to minimize schedule disruption. Unfortunately, we cannot guarantee entrance into classes that are full or closed, nor can we guarantee that your child's overall schedule will remain the same.

Please carefully consider your request and discuss it with your son/daughter in order to make an informed decision.

Parent/guardian section:

Parent/guardian's Signature: _____ Date: _____

Phone # and best time to call: _____

Acknowledgement of receipt of the Placement Change Form:

Counselor's Signature: _____ Date: _____

Department Chairperson: _____ Date: _____