



## Schedule Change Request

<b>Application Date</b>	
<b>Student ID Number</b>	
<b>Billing Account #</b>	

Student Personal Information					
Last Name		First Name	Middle Name	Suffix (Jr, III)	Preferred first name
Street Address			City		State   Zip Code
Home Phone and area code		Reason for request			

### Instructions

1. List all classes in current Schedule.
2. Add any new classes at bottom of list.
3. In the "action" column,  
Circle the action to be taken for each class: K Keep the class. C Cancel the class. A Add a new class.

Item	Action	Class Number	Class Title	Class Day
1.	K C A			
2.	K C A			
3.	K C A			
4.	K C A			
5.	K C A			
6.	K C A			
7.	K C A			
8.	K C A			
9.	K C A			
10.	K C A			
11.	K C A			
12.	K C A			
13.	K C A			
14.	K C A			
15.	K C A			

Parent or Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Artistic Director's Signature \_\_\_\_\_ Date \_\_\_\_\_

### For Office Use only

Scheduling change to be effective on Date:	Class Count Before Change	After Change
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