

### BHS Schedule Correction Form

*(Schedule corrections will only be considered through the 10<sup>th</sup> school day of the semester.)*

Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_ Grade: \_\_\_\_\_

Your phone number: \_\_\_\_\_ Email (print clearly): \_\_\_\_\_

Counselor Name: \_\_\_\_\_ Date: \_\_\_\_\_

#### Steps to request a Schedule Correction:

1. Complete this form fully and legibly
2. Give the completed form to the counseling center office.

**SCHEDULE CORRECTIONS WILL BE CONSIDERED FOR CORE CLASSES ONLY. Please note that you are NOT ALLOWED TO CHANGE ELECTIVES THAT YOU REQUESTED AS YOUR ALTERNATIVE CHOICE.**

If you are requesting a schedule correction you must meet at least one of the six criteria listed below. If your request does not meet any of the six criteria, do not fill out this form as your request will be denied. Please check the criteria that apply to your request.

#### Reason for Schedule Correction Request:

- ☐ **Incomplete schedule.** 9<sup>th</sup> and 10<sup>th</sup> graders must be enrolled in seven classes and 11<sup>th</sup> and 12<sup>th</sup> graders must have a minimum of six classes. (Open 1<sup>st</sup> or 7<sup>th</sup> period only)
- ☐ **Seniors missing a course required for Graduation**
- ☐ **Prerequisite course not completed (or previously failed)**
- ☐ **Time conflict with a course taken at another school**
- ☐ **Scheduled for the same course twice**
- ☐ **Have already taken this class**

Course that you are requesting be dropped from your schedule: \_\_\_\_\_

Course that you are requesting be added to your schedule \*\*: \_\_\_\_\_

**\*\* Please note that this course change may result in a change in your electives and/or the order of your courses/teachers.**

Office use only: ☐ *accepted* ☐ *denied* Reason: \_\_\_\_\_

Completed By: \_\_\_\_\_ Action Taken: \_\_\_\_\_