## Legacy High School Schedule Adjustment Request

I understand I must complete this form if I have a schedule adjustment request that matches one of the schedule adjustment options listed below. I also understand schedule adjustments will only be completed (if possible) on the dates set aside for my grade:

The scheduled dates for schedule changes are the following:

Seniors: August ${ }^{\text {th }}$ from 8:00 am - 11:00 pm<br>Juniors: August $8^{\text {th }}$ from 12:00 pm - 3:00 pm<br>Sophomores: August $9^{\text {th }}$ from 8:00 am - 11:00 am<br>Freshmen: August $9^{\text {h }}$ from 12:00 pm - 3:00 pm<br>\section*{***THERE ARE NO MAKEUP DATES \& THERE WILL BE NO EXCEPTIONS TO THIS***}

Please understand a great deal of time and effort is dedicated to registration and the scheduling process. Teacher allotments, assignments, and schedules are determined based on classes students registered for earlier this year during registration. For these reasons, your schedule will not be adjusted for any reason beyond those listed below. Schedule adjustments to change a teacher or a lunch will not be considered.

Name: $\qquad$ Grade: $\qquad$

LHS Schedule Adjustment Options (please check all that apply to your request):
$\bigcirc$ I have an incomplete schedule.
$\bigcirc$ I do not have a course I need for graduation.
$\bigcirc$ I do not have a prerequisite for a course on my schedule.
〇 I would like to add or replace a current course with a Dual Credit or AP Course.
$\bigcirc$
I need to make a change to meet requirements of the ND Academic or CTE Scholarship.
I would like to add a course to my schedule (I have an open mods I would like to fill).

Based on the reason(s) noted above, the course I would like to add or drop on my current schedule is:
$\square$
I would like this schedule adjustment because:

Parent/Guardian: I approve of my student's request for a schedule adjustment and give permission to make the adjustment if possible.

Parent Signature: $\qquad$

