

Marengo Community High School
Schedule Change Form

Student's Name (Print) _____ **Fr So Jr Sr**

Drop _____ Add _____

____ **Media Aide:** Hour _____ Sem 1, 2 / Year Teacher Signature _____

____ **Office Aide:** Hour _____ Sem 1, 2 / Year Office Signature _____

____ **Teacher Aide:** Hour _____ Sem 1, 2 / Year Teacher Signature _____

Reason for change: Admin Parent PE exempt Teacher Counselor Other

Parent Signature _____ **Date** _____

****Do not write below this line. Office use only.**

Drop/Teacher initial

Add/Teacher initial

1 _____	1 _____
2 _____	2 _____
3 _____	3 _____
4 _____	4 _____
5 _____	5 _____
6 _____	6 _____
7 _____	7 _____

Initial Accepted _____ Initial Denied _____ Date _____