

POWHATAN MIDDLE SCHOOL COURSE OVERRIDE REQUEST FORM

Student Name: _____ Grade: _____

Teacher Recommended Course: _____

Parent/Guardian Preferred Course: _____

Reason: _____

Date of Parent/Teacher Conference: _____

Middle and elementary school teachers recommend courses for students individually and only after carefully reviewing a compilation of data. Teachers put every consideration into recommending courses for which students will be developmentally prepared, individually and academically challenged. Although our teachers have had an outstanding history of recommending appropriate classes for our students, we understand that there are times a parent/guardian would like his/her student to be considered for a different class. In this case, it is important that the parent/guardian communicates with the teacher in order to discuss the reasons for the recommendation and also the parent/guardian concerns. After careful consideration, parents/guardians are invited to complete this Course Override Request Form. We ask that you please consider the following points when completing an Override Request:

-By signing this form, the parent/guardian takes full responsibility for the student's placement, as this course was not recommended by his/her teacher.

-If the student encounters academic difficulty in the new class, it is important that every effort is made by the child in order to be successful. This may require investing more time and resources to support your child through tutoring.

-If a scheduling request is made during the school year, it may impact the rest of the student's schedule. It may not be possible to change just the one class, according to the master schedule.

-Parents will be notified to discuss the override by the principal over the summer.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Principal Signature: _____ Date: _____