



SPRINGBANK COMMUNITY HIGH SCHOOL  
COURSE CHANGE REQUEST FORM

**Student Name:** \_\_\_\_\_

**Grade:** \_\_\_\_\_

**Requested Change(s)**

**Semester One**

**Semester Two**

Drop \_\_\_\_\_

Drop \_\_\_\_\_

Add \_\_\_\_\_

Add \_\_\_\_\_

Drop \_\_\_\_\_

Drop \_\_\_\_\_

Add \_\_\_\_\_

Add \_\_\_\_\_

**Reason for Changes:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Counsellor's Comments** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Counsellor's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## Timetable Options

<b>Semester 1</b>				
<b>Semester 2</b>				

<b>Semester 1</b>				
<b>Semester 2</b>				

<b>Semester 1</b>				
<b>Semester 2</b>				