



# DEER LAKES HIGH SCHOOL SCHEDULE CHANGE FORM

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**DATE:** \_\_\_\_\_

**STUDENT NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_

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**ADD:**

COURSE NAME: \_\_\_\_\_

COURSE NAME: \_\_\_\_\_

COURSE NAME: \_\_\_\_\_

**DELETE:**

COURSE NAME: \_\_\_\_\_

COURSE NAME: \_\_\_\_\_

COURSE NAME: \_\_\_\_\_

Reason for this request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*By typing my name I am electronically signing this form.*

\_\_\_\_\_  
**PARENT SIGNATURE**

\_\_\_\_\_  
**DATE:**

**COMPLETED**

\_\_\_\_\_  
**SCHOOL COUNSELOR'S SIGNATURE**

\_\_\_\_\_  
**DATE:**