SCHEDULE CHANGE REQUEST FORM

Return to Homeroom Teacher OR Dean Office

<table>
<thead>
<tr>
<th>6th – Office 123</th>
<th>7th – Office 225</th>
<th>8th – Office T-10</th>
</tr>
</thead>
</table>

Student Name: __________________________ Grade: ____ Homeroom: _________________
1st Period Teacher: _____________________ 5th Period Teacher: _________________

Directions: Please complete this form if you have a change request that fits within the Meyerland Middle School schedule change policy. Priority for schedule change requests will be given to students who submit their form within the first 10 days of the semester (August 30 – September 11). A great deal of time is invested in the registration and scheduling process. All schedule change requests will be based on space available and in some cases the teacher, therefore no changes will be allowed unless deemed necessary by the Dean.

Please Note:
• SCHEDULE CHANGES WILL NOT BE GRANTED FOR THE FOLLOWING REASONS:
  o Teacher preference.
  o Student wants to be with friends.
  o The teacher gives too much work.
• If seats are not available in the requested class, a schedule change will not be made.
• Schedule change requests that affect class size mandates will not be granted.

STUDENTS MUST CONTINUE TO FOLLOW THEIR PRESENT SCHEDULE UNTIL THEY RECEIVE OFFICIAL NOTIFICATION OF A CHANGE. IF/WHEN YOUR REQUESTED CHANGE IS APPROVED, YOU WILL RECEIVE A NEW SCHEDULE.

<table>
<thead>
<tr>
<th>Current Class</th>
<th>Requested Class</th>
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<tbody>
<tr>
<td>Period</td>
<td>Course Name</td>
</tr>
</tbody>
</table>

Please write the reason for your requested schedule change:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Student Signature: __________________________ Parent Signature: __________________________

Office Use Only

Date Received: ________________ Received by: __________________

_____ Approved _____ Denied  Reason for Denial: __________________

Date Schedule Change Completed: __________________ Completed by: __________________

MPVA

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