

Chelsea High School

Recommended Course Waiver

Any student who wishes to enroll in a course other than the one recommended by his or her teacher is required to complete the following form, have it signed by a parent or legal guardian, and return it to the guidance counselor when meeting with them. This waiver is only necessary for required core-area subjects (English, math, science, and social studies) and foreign languages.

Student Name: _____

I understand that the course requested below has not been recommended by my child's present teacher. However, I request that he/she be permitted to enroll in the desired course, contrary to teacher recommendation. By signing below, I indicate my approval of this course selection. **Furthermore, I understand that this request is final and no schedule changes related to this request will be considered by counselors or administration.** I also understand that the requested course change will involve more effort and commitment than previously demonstrated by my child, and I assume full responsibility for this course selection decision.

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Teacher Recommended Course: _____

Teacher Signature: _____ Date: _____

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Parent Requested Course: _____

Parent Signature: _____ Date: _____