

# Lewisville High School Level Change Request

*Directions: Students/Parents should complete sections 1-4 and turn the form in to their classroom teacher.*

Counselors							
Jackson	<i>A-Chaq</i>	Swain	<i>Gh-Lad</i>	Staggs	<i>O-Sha</i>	Lewis	<i>Freshmen</i>
Walker	<i>Char-Ge</i>	Alagood	<i>Lae-N</i>	Mosby	<i>She-Z</i>		

To be completed by Student/Parent

Teacher

**1** Date: \_\_\_\_\_ Counselor: \_\_\_\_\_  
 Name: \_\_\_\_\_ ID#: \_\_\_\_\_  
 Grade: \_\_\_\_\_ Date Due: \_\_\_\_\_

Lewisville High School Level Change Policy:

For a level change to be approved, the following criteria must be met:

- > **Student must have a grade of 74 or below**
- > **Parent/Teacher Conference**
- > **Parent Approval (see below)**
- > **Teacher Approval (see below)**
- > **Room in a regular class**
- > **Meet above Deadline**

Course to Drop: \_\_\_\_\_ Course to Add: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Student Signature: \_\_\_\_\_

**3** Reason for Request: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Parent/Teacher Conference Date \_\_\_\_\_  
 Summary of Conference \_\_\_\_\_  
 \_\_\_\_\_

Teacher Signature: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Check One  Approved  Denied

**4** Must Provide Rationale: \_\_\_\_\_  
 \_\_\_\_\_

Admin Approval: \_\_\_\_\_ Ms. Bauter

**Do Not Write Below This Line**

DEPARTMENT CHAIR APPROVAL:

\_\_\_\_\_ Approved Reason, if denied: \_\_\_\_\_  
 \_\_\_\_\_ Denied \_\_\_\_\_  
 \_\_\_\_\_