OPTIONS CHANGE FORM FOR TERM _____

Student Name: _____ Grade: _____

| Steps to take: | Option | Signatures |
|--|--------|--------------------|
| Talk to your parents about the option switch you would like to make and if they agree get a signature from them. | | Parent Signature: |
| Talk to the teacher of the option you would like to transfer out of. If he/she agrees, get a signature. | | Teacher Signature: |
| Talk to the teacher of the option you would like to transfer into. If he/she agrees, get a signature. | | Teacher Signature: |
| 4. Take this slip to Mrs. Cameron and get her signature. | | |

*NOTE:

All option change forms for all 3 terms need to be submitted by Friday, September 16th.