Chippewa Falls Senior High School

Course Request Change Form

DEADLINE: April 15

Student Name: _______________________________ Date: ______________

Grade: ___________ Counselor: ________________________________

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<th>Course to Drop</th>
<th>Course to Add</th>
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The reason you are requesting this change:

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Student Signature: _______________________________ Date: ______________

Completed forms are due to Student Services **no later than April 15, 2019.**