Hull High School Class Waiver Request Form 2019-2020

<u>Policy:</u> Placement in classes is based upon teacher recommendations and prerequisites. Students and parents may decide to move to a higher level if the student meets the prerequisite in a specific course. Students and parents who would like to move to a higher level for which the prerequisite has not been met must fill out the following waiver request form. Please read the terms carefully. Decisions granting waivers are based upon the student's written statement, record, available space, and other criteria as determined by the principal.

Students granted a waiver would be allowed to drop drown a level prior to the issuance of first term progress reports. After this time, students in a class on a waiver will not be allowed to drop down a level for any reason. They will be required to remain in the class for the remainder of the year.

Directions:

- 1. The student must complete a separate waiver for each class he/she is attempting to waive into.
- 2. The student must fill out the information on this form AND answer the questions on the back.
- 3. The student should give the Teacher Evaluation Form to their current teacher in the subject area they are filling out the waiver for.
- 4. The waiver must be completed and turned in no later than Friday, April 26, 2019 to the Memorial Middle School Main Office. Waivers turned in after Friday, April 26th will be considered late. Late waivers will be noted in the approval process.

Student:
Schedule placement (course title):
Requested Placement (course title):
When a student seeks to waive into a higher level, it is important to remember that the student is taking on a great deal of academic responsibility. Course levels are designed in relation to the pacing of curriculum, methods used to teach the curriculum, and the level of student independence expected. Often times there can be a period of adjustment, as a student learns what is expected of him or her when moving between evels. While evaluating waiver requests, the level of interest and commitment to the subject will be carefully considered.
Student Signature:
Parent/Guardian Signature:
Office Use Only:
Approved: Not Approved:

Why would you like to tal	ke the H/AP cours	e you are seeking a waiv	er for?	
Describe your study habit understand.	s and what you do			gling to
			2-1	
Is this your first time com Yes No	pleting a waiver fo	or this subject area?		
Go on to your ASPEN acc area (you can find this und			ut your current class in t	his subject
	Term 1	Term 2	Term 3	
Homework Average:				
Test/Quizzes Average:				
Writing Assignments:				
Term Grade				

^{*}If your teacher does not have an equivalent column, please write N/A in the space.

Waiver Request Teacher Evaluation

Directions: Student, fill out the first part of this form and give it to your current teacher to complete.

Student Name:
Class Attempting to Waive Into:
Teacher: Please complete this form and return in to MMS Main Office at your earliest convenience.
Teacher Name:
Do you think the student has the academic skills necessary to be successful in the H/AP course listed above? Yes No
Has the student demonstrated in your class that he/she has the work ethic necessary to be successful in the H/AP course listed above? Yes No
Would you recommend that this student take the H/AP course listed above? Yes No Please write any additional comments below or on the back of this form: