

Timber Creek High School

Schedule Concern Form 2016-2017

Please note that all schedule concerns will be considered based on necessity and/or availability. The master schedule was built on the course requests that were completed at the end of last school year. Your schedule was created based on your requests and alternate selections. Due to this, schedule change requests will be reviewed based on maintaining the integrity of the master schedule. Any program changes will require a director or coach's signature. ***Pre-AP or AP class changes will have to go through the SAVE process after the 3rd week of school.***

Circle your counselor by last name:

A-Car Marissa Diaz

Cas-Fe Abby Scanlon

Fi-He Michelle Arnold

Ho-Mars Cherie Gopffarth

Mart-Pa Randy Colvin

Pe-Se Jamie Mays

Sh-Wa Jackie Swinney

We-Z Dana Benton

Your counselor will email you as your form is reviewed. Please check e-mail and review HAC for updates and changes.

Name: _____

ID: _____

Email: _____

Grade: _____

Class to DROP

Class to ADD

SIGNATURE
(Coach or Director, if needed)

STUDENT SIGNATURE _____

PARENT SIGNATURE _____

DATE: _____

Notes for my counselor

