



# Subject Change Form

Middle Secondary (9-10)

## STUDENT TO COMPLETE

<b>STUDENT NAME:</b>	<b>HOME GROUP:</b>	<b>DATE:</b>
My reason/s for requesting a change to my subject selections are:		
<input type="checkbox"/> Failing current subject <input type="checkbox"/> Incorrect subject choice <input type="checkbox"/> Change in pathway direction <input type="checkbox"/> Teacher/HOD recommended		

## PROPOSED SUBJECT CHANGES

CURRENT SUBJECT	PROPOSED NEW SUBJECT

## PROPOSED SUBJECT HOD TO COMPLETE

HOD supports change: <input type="checkbox"/> Yes	HOD Name:
Comments:	HOD Signature:

## GUIDANCE OFFICER/DEPUTY PRINCIPAL

Comments:	Name:
	Signature:
	Date:

## PARENT SIGNATURE

Parent Name:
Parent Signature:

## OFFICE USE ONLY

Finance Officer Notified <input type="checkbox"/> Yes	Copy provided to Admin Officer <input type="checkbox"/> Yes
Student Data Manager Notified <input type="checkbox"/> Yes	Pathway change parent contact <input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
Completed by (Name):	Signature: