

NORTH RALEIGH CHRISTIAN ACADEMY MIDDLE SCHOOL DROP / ADD FORM 2017

(FORMS MUST BE RECEIVED BY THE ADMINISTRATION NO LATER THAN FRIDAY, AUGUST 25, 2017, 3:00PM)

(PRINT) STUDENT NAME: _____ GRADE: _____

ELECTIVE TO DROP

ELECTIVE TO ADD

1st choice _____

2nd choice _____

REASON FOR DROPPING THIS ELECTIVE ***(REQUIRED)***:

***Both are required**

STUDENT SIGNATURE: _____ DATE: _____

PARENT SIGNATURE: _____ DATE: _____

***NOTE: Please understand we are not able to accommodate every student's 1st choice elective preference.**

(OFFICE USE ONLY)

REQUEST APPROVED _____

REQUEST DENIED _____

REASON FOR DENIAL: