

## VISION CHARTER SCHOOL ADD/DROP REQUEST FORM

Student First and Last Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Class to Drop	Period	Teacher Signature
Name of Class to Add	Period	Teacher Signature

Name of Class to Drop	Period	Teacher Signature
Name of Class to Add	Period	Teacher Signature

Reason for Change:

\_\_\_\_\_

\_\_\_\_\_

Parent Signature: \_\_\_\_\_

**Add/Drop Forms for the Spring 2023 Semester are due on December 15th, at 3:30 pm.**

*Signatures of the teacher and parent do not guarantee your request(s) will be fulfilled.*

For Office Use Only:
Submitted: _____ Received by: _____ Outcome: Change    No Change
Notes: _____
_____