



**2020-2021
REQUEST FOR TIMETABLE CHANGE**

***This timetable change request form does not guarantee that a timetable change will take place. Timetable changes are subject to course availability, timetable suitability and Ministry recommendations.**

****This form must be completed and signed by student and parent/guardian (unless student is 18years old), and EMAILED to alpha counsellor as soon as possible. Hard copies will not be accepted.**

Timetable change requests will not be accepted after MONDAY, AUGUST 24TH, NOON.

*****Students will have ONE opportunity only to request a timetable change. Multiple request forms will NOT be accepted.**

SECTION 1: STUDENT INFORMATION

Please **PRINT**

STUDENT #

SURNAME: _____ FIRST NAME: _____

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STUDENT E-MAIL: _____

STUDENT MOBILE #: _____

GUIDANCE COUNSELLOR

- C. Zaghikian (A-Che) Christine.zaghikian@tdsb.on.ca
- B. Panagopoulos (Ch-H) Bill.panagopoulos@tdsb.on.ca
- D. Low (I-Lo) Darren.low@tdsb.on.ca
- R. Leo (Lu-R) Rosalia.leo@tdsb.on.ca
- J. Matsumoto (S) Jason.matsumoto@tdsb.on.ca
- D. Lawrence (T-Z) Douglas.lawrence@tdsb.on.ca

SECTION 2: COURSE CHANGES

DELETE COURSE: _____	ADD COURSE: _____
DELETE COURSE: _____	ADD COURSE: _____
This change is necessary for one of the following reasons (check appropriate box):	
<input type="checkbox"/> Failed course from previous year	COMMENT: _____
<input type="checkbox"/> Summer school results	COMMENT: _____
<input type="checkbox"/> Incomplete timetable (subjects missing)	COMMENT: _____
<input type="checkbox"/> OTHER (please be VERY specific)	COMMENT: _____
OTHER COMMENTS: _____ _____ _____	

STUDENT SIGNATURE: _____

Student over 18

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

Office Use:
_____ Date of Completion