## **Classroom Change Request**

2021/2022 School Year

Please complete the below information and return this form to our Monroe Office. Prior to completing this form, please read through and acknowledge the below information.

- Change request forms must be completed by the parent/guardian of record. If custody of the student is shared, we ask that both parents/guardians sign below to acknowledge the request.
- Please note that all potential classroom changes are contingent upon classroom student numbers.
  We must work to balance classrooms and will not remove any child from a classroom to accommodate a Classroom Change Request
- All Classroom Change Requests will be processed September 15 and September 16. Notification of approved/denied requests will be communicated on Friday, September 17 with changes taking place on Monday, September 20.

Student Name (First, Middle	c, Last)	
Current Grade (21/22)	Current Assigned Teacher	
Parent/Guardian Name (Fire	t/Last)	
Requested Classroom/Teac	ner (if applicable)	
(Below) Please include the r	eason/reasons for your requested Classroom Change Request	
Signature of Parent/Guardia	 In	