

MHS ▪ Course Waiver ▪ 2018-2019

Student: _____

Grade: 9

Counselor: _____

Date Received by Counseling Office: _____

As the parent or guardian of the student named above...

1. *I have reviewed the course/level recommended by my child's teacher, and I do not agree. My signature below indicates that I consent to waive my child into the course listed below, despite the teacher's recommendations to the contrary.*
2. *I understand that a waiver is required for moving up in difficulty within the college prep level and from college prep to honors. Signature from the parent and student are required. Forms are to be returned to the WAMS counseling office.*
3. *I have read the MHS Waiver Policy outlined on page 10 of the 2018-2019 Program of Studies, and I understand that students may only waive into a course where the necessary prerequisites have been met and may not waive beyond one level of rigor.*
4. *I understand that if the level of difficulty proves to be too demanding, my child may not be able to change his/her schedule based on the constraints of the master schedule.*
5. *I further understand that a course change requested after the master schedule is built may be disruptive to other aspects of the student's schedule. Thus, students should make sure that the courses selected, or waived into, are the courses and levels they intend to keep for the duration of the 2018-2019 school year.*
6. *Finally, I understand that April 30, 2018 is the deadline for obtaining and submitting waiver signatures. No waivers will be accepted beyond this date.*

Recommended Course	Level



Preferred Course	Level

I have discussed with my child the course and/or level preferred versus the course/level recommended. I understand that we can contact a teacher or supervisor with further questions. By signing below, I am acknowledging that we request a waiver into the above listed course.

Parent Signature

Student Signature

Date

Complete one form for each course to be waived.

WAIVER FORM SUBMISSION

Students must submit waiver forms to the WAMS guidance office by April 30. Contact information for the supervisors is provided should you have any questions before submitting the waiver form.

Department	Supervisor	Email	Phone 778-6610
English	Dr. S. Tosti	stosti@mtps.com	Ext. 12310
Arts & Technology	Mrs. P. Rowe	prowe@mtps.com	Ext. 18320
Math	Mrs. J. Colby	jcolby@mtps.com	Ext. 12350
Science	Mr. Quinn	gquinn@mtps.com	Ext. 18330
Social Studies/World Language	Ms. Rodriguez	rrodriguez@mtps.com	Ext. 12038