

BRIDGEHAMPTON UFSD
ADD/DROP FORM

NAME: _____ GRADE: _____ Date: _____

FOLLOW YOUR REGULAR SCHEDULE UNTIL YOU ARE CONTACTED ABOUT THIS REQUEST.

1. **STUDENT:** What change are you requesting? _____

Explain the reason for request: _____

STUDENT'S SIGNATURE: _____ Date: _____

2. **TEACHER'S SIGNATURE:** _____ Date: _____

Teacher's Comments: _____

3. **PRINCIPAL'S SIGNATURE:** _____ Date: _____

Principal's Comments: _____

4. **PARENT/GUARDIAN:**

PLEASE NOTE THAT STEPS 1, 2 AND 3 *MUST BE COMPLETED* BEFORE YOU SIGN.

Comments: _____

- I am aware that by making the above change, my child's 4 year plan/diploma status may be subjected to change.

PARENT'S SIGNATURE: _____ Date: _____

5. **COUNSELOR:** Current Diploma Status - LOCAL REGENTS ADVANCED REGENTS W/DESIGNATION

Will this request affect the diploma status? Yes/No If yes, please specify: _____

COUNSELOR'S SIGNATURE: _____ Date: _____