# PETITION FOR COURSE UPGRADE
## Harrison High School

Name _____ Class – Fr So Jr Sr

Address _____ Semester – Fall Spring

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Recommended Class _____

Petitioned Class _____

Each year teachers, guidance counselors and administrators make recommendations for scheduling each student's classes based upon the student's prior academic performance, test scores, attendance and motivation or behavior. In some cases the student and parent or guardian contest the school's recommended course and may choose to PETITION FOR A COURSE UPGRADE, to allow the student to take a more rigorous or challenging course or program selection. This petition enables and encourages students to choose more rigorously while providing a safety net to review or reconsider the decision during the first four weeks of the course without an academic penalty.

Pending the approval of this petition the student will be placed in the "Petitioned Class" under the following agreement to terms and conditions:

1. Attendance does not become an issue of concern.
2. Completion and passage of classwork is evident.
3. Motivation and behavior does not interfere with learning for the student or classmates.
4. At anytime during the first four and ½ weeks, the student and parent may request removal from the petitioned class, back into the recommended class without academic penalty.
    a. The student and parent understand that the student's schedule may need to be completely rebuilt to accommodate the change.
    b. The student will be given the opportunity to complete the missed work in a timely manner without penalty in the recommended class.
    c. The petitioned class will not appear on the student's transcripts or records (no failing grades, or withdrawal, etc.)
5. At the middle of the quarter, the guidance counselor and teacher will review the progress of each student on petition and make a decision to 1) allow the student to continue in the class, 2) require the student to be in this petition status for six more weeks, or 3) move him/her into a more appropriate level class or program.

Student's signature _____ Date _____

Parent/guardian's signature _____ Date _____

Guidance counselor's signature _____

Principal's signature _____

**Please return this completed form to Principal/Guidance Office**