Dear Parent/Guardian,

You and your student have requested a shortened schedule during one or more terms for the 2019-20 school year. A shortened schedule is one that has your student enrolled in fewer than five courses. Only students who are on track to graduate may request a reduction in their school schedule.

Not having a 5th period will result in a release from school prior to the scheduled end time.

Not having a 1st period will result in a start time that is later than the scheduled start time.

Not having period 2, 3 or 4, will result in students being unassigned to a class during the school day. Students are required to stay on campus during this time in the designated space.

Your signature below indicates that you understand and grant permission for your student’s request for a shortened schedule.

Parent/Guardian Permission for Off-Roll

Off-Roll Requested: T1 - Period: _____ T2 - Period: _____ T3 - Period: _____

Class you will drop for off-roll (must be in same period as desired off-roll)

___________________________  ______________________  Please circle if you are in
Student Name                      Student ID                     AVID or ELL

_______________________________________  ______
Student Signature                  Date

___________________________  ______________________
Parent Name                      Parent Signature

_______________________________________  ______
Date

Off-RollPermission2019