

Hunter School of the Performing Arts

YEARS 8 & 9 CHANGE OF ELECTIVE SUBJECT APPLICATION 2020

Name of Student: _____

Year: _____

1.

Requested New Subject(s)	Head Teacher to sign if change acceptable.	Class Name if more than one	Present Subject(s) you request not to continue with, and class if more than one	Head Teacher of discontinued subject to sign

Reason for Change: _____

2.

Student Contract: *I understand that if, at a later date, if I am allowed to change back to my previous subject I may receive ZERO for any assessment tasks held during this period. In addition I accept that course fees may differ and undertake to catch up on all work in this subject within the time specified by the Head Teacher of this subject.*

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

3. **Deputy Principal** for your year group (signature needed): _____

4. **Return form** to Mr Peters

School Records Adjusted:	Signature	Date
Timetable		
Board of Studies		
ERN – Rolls & Reports		
Finance		

You need the following slip from Mr Peters before you:

- 1) Stop attending any class
- 2) Start attending any new class

Name of student : _____ Year: _____

Requested New Subject(s)		Present Subject(s) you requested to change:	
Change completed:	Accepted: <input type="checkbox"/> Declined: <input type="checkbox"/> (PTO)	Date:	