

Teacher of Record Signature:

Ambridge Area School District – Course Waiver Request Form



The state of the s			CONTRACTOR OF THE PARTY OF THE
Student's Name:		Grade:	
Course Requested:			
Course Recommended :			
Course Requested:			
Course Recommended :			
WHAT IS THIS FORM AND WHY DO YO	OU NEED TO COMPLETE I	Τ?	
This form is used when students choos		•	ed guidelines or have not
met the pre-approved teacher recomm			
	· -	hich they do not yet meet guidelines.	
2. Disclose the challenging natur	•	nging coursework & commitments of th	sis chaica
		ions I to Honors Communication I – No	
to Algebra II, etc.	e level – i.e. communicat	ions i to honors communication i – No	t allowed. Pre-Algebra
		S UNDERSTANDING OF THE FOLLOWIN	
_		ounterparts and demand more time &	
·	•	ading, writing, research, summer work	• •
-	•	dents, but particularly of students in high	
Students are required to unde	istanu the summer work	commitment and contact the district f	or advancement.
Student's Initials Parent's Initials	s I understand that		
Student's <u>initials</u> Farent's <u>initials</u>	I agree to use/provide longer periods of study time and extra tutoring.		
I agree to proactively cor			
		ogress in Tyler on a weekly basis.	ine teacher.
		e highest level of academic integrity.	
I understand the student will not be removed from the course once			he course once
		ust be completed for a final grade.	THE COURSE OFFICE
		m will be retained by the school for fut	rure reference
	r dilaci stalla tilis for	in will be retained by the sensor for rule	are reference.
** If a class is dropped after the second		·	_
"W-F" will appear on the transcript and received.	be computed in the grad	e point average as an "F" (O quality poin	its) and no credit will be
STUDENT COMMITMENT		PARENT/GUARDIAN COMMITMENT	
	course(s) for which I	Requesting that my child be enrolled	d in course(s)in which
I am requesting that I be enrolled in course(s) for which I have not met the recommended guidelines. I am making a		he/she does not meet the recommended guidelines and:	
commitment to discipline myself with time management to		Monitor progress and ensure extra study time, study and	
study and complete work habits while in the course. I		resources, tutoring and other needed support. I will	
proactively participate in tutoring and keep open		proactively communicate with the teacher to help ensure	
communication with my teacher about any questions or my		child's success in the requested cour	•
concerns. I understand and agree that		·	· ,
not be removed from the class once e		*I understand and agree the	e student will not be
		removed from the class once enrolle	
Signature:	Date:	Signature:	Date:
School Use Only:			
School Counselor Signature		Date:	

Date: