



# Change of Enrollment Form

CAREER AND TECHNICAL EDUCATION

<b>STUDENT INFO</b>	<input type="text"/>	<input type="text"/>
	<b>STUDENT NAME</b>	<b>DISTRICT</b>
	<input type="text"/>	<input type="text"/>
	<b>REQUESTED BY (Counselor)</b>	<b>DATE OF REQUEST</b>

<b>PROGRAM INFORMATION</b>	<b>CTE PROGRAM TO ADD:</b> <input type="text"/>	<b>SAEC</b> <input type="checkbox"/>	<b>SESSION</b> <input type="checkbox"/> AM
		<b>MYERS</b> <input type="checkbox"/>	<input type="checkbox"/> PM
	<b>CTE PROGRAM TO DROP:</b> <input type="text"/>	<b>SAEC</b> <input type="checkbox"/>	<b>SESSION</b> <input type="checkbox"/> AM
		<b>MYERS</b> <input type="checkbox"/>	<input type="checkbox"/> PM
<b>Reason for Drop/Transfer (please X)</b>			
<input type="checkbox"/> Career Interest Change	<input type="checkbox"/> Dropped from District	<input type="checkbox"/> Academic Scheduling	
<input type="checkbox"/> Personal	<input type="checkbox"/> Poor Attendance	<input type="checkbox"/> Lack of Interest in CTE	
<input type="checkbox"/> Never Entered	<input type="checkbox"/> Other		

<b>ACADEMIC INFORMATION</b>	<b>INTEGRATED ENGLISH</b> (1 credit over two years) .....	ADD <input type="checkbox"/>	DROP <input type="checkbox"/>
	<b>INTEGRATED MATH</b> (1 credit over two years) .....	ADD <input type="checkbox"/>	DROP <input type="checkbox"/>
	<b>CAREER AND FINANCIAL MANAGEMENT CREDIT</b> (1 credit over two years) .....	ADD <input type="checkbox"/>	DROP <input type="checkbox"/>
	<b>PHYSICAL EDUCATION</b> (.5 credits over one years) .....	ADD <input type="checkbox"/>	DROP <input type="checkbox"/>
	<b>HEALTH PULL OUT</b> (.5 credits over 1/2 year) .....	ADD <input type="checkbox"/>	DROP <input type="checkbox"/>
	<b>OTHER PULL OUT (SAEC Only)</b> <input type="text"/>		
	<i>PLEASE CALL COUNSELOR WITH ANY ADDITIONAL SPECIAL REQUESTS</i>		

<b>COMMENTS</b>	          
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CTE Counselor: <b>X</b>	Date Received: .....
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