Program of Choice (POC)/Academy

CHANGE/DROP FORM

for 2019-20 School Year

Student's Name: _____ ID #: _____ Current Grade: ____

Current School Name: _____ Zoned for: _____

Current POC/Academy:_____

Current Strand/Track: _____

Intend to withdraw from the Program of Choice/Career Academy: _____ Yes _____ No

Step #1… Student's reason for wanting to drop Program of Choice.

_____
_____
_____
_____

Step # 2… Parent's comments/recommendation regarding student's request:

_____
_____
_____

Step # 3… Career Specialist's or IB/AICE Coordinator's Review regarding student's request:

_____
_____
_____

_____ _____ _____ _____

***Student* Signature** **Date** ***Parent* Signature** **Date**

_____ _____ **Approved / Disapproved**

Final Review by: **Date**

Career Specialist or IB/AICE Coordinator –
Once completed, a copy should be given to the Career Specialist & Theresa Dodd

Reminder – Students not zoned for the current school, who will no longer be enrolled in any POC's that make the student eligible to attend a non-zoned school, will have to return to their zoned school for the next school year.

ONCE COMPLETED, PLEASE TURN THIS FORM IN TO THE FRONT DESK AND ASK THAT IT BE PLACED IN MRS. COMBS' MAILBOX.