GROUP / LEVEL / COURSE CHANGE FORM

Student's full name:	
1. I wish to request permission to change a group / level /	course /
(1):	to
(2):	
2. I hereby grant / deny a request to change a group / leve	el / course.
Teacher (1)	-
Teacher (2)	-
3. I confirm that the change is feasible.	
School scheduler:	
4. I hereby grant/ deny permission to change group / leve	el / course
IB-DP coordinator:	-
5. I have been fully informed about group / level / course	change
Teacher (1):	_
Teacher (2):	
School scheduler:	
Form teacher:	_

This form is to be kept by your form teacher.