Student Change Form

Due to tight room scheduling and other teacher schedules. The following information is necessary for adding/changing a student's schedule. Schedule changes must be approved by the teacher and Registrar before they take effect.

Student Name:	Date:
Teacher: li	nstrument:
	Class:
Type of Change:	
Day Change: Time Change:	
Reason(s) for Day or Time Change:	
Discontinue Lessons: *	
Reason for discontinuing lessons	
• Moving	
Lack of interest	
Poor performance Discipling problems	
Discipline problemsOther	
Notification Received	
Written notification by	parent
Parent phoned	
Mo notification	
Signature of Parent/Guardian:	
(A 30 Day Notice is required for termination of lessons)	
For official use: Connecticut Valley School of Music & Dance	
Effective Date of Change:	
Signature:	
Approval of TeacherYes No Signature:	
Approval of RegistrarYes No Signature:	