

**Kell High School  
Additional Core Course Request Form**

This form is required when a student would like to “double up” in a math, science, or world language class during the same school year (doubling up for English and Social Studies is not available). To be eligible, the student must meet the identified prerequisites for the requested course.

**IMPORTANT:** Acceptance of the Additional Core Course Request form by Kell High School **does not** guarantee placement in the requested class. Students will see the additional course requested in the Course Registration Review period; however, after all students have been scheduled in required classes, submitted forms will be processed on a space available basis. If approved, students will see the requested course as part of their 26-27SY schedule when released in late July.

Student ID: \_\_\_\_\_ Grade Level for 26-27SY: \_\_\_\_\_

Student First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

**Core Area of Double-Up Request:**  Math  Science  World Language

Course Name: \_\_\_\_\_

Please reference Kell's Catalogue on the website for the correct course name. It will not be the responsibility of the Curriculum team to determine which course to double-up.

Agreement Statement:

*With this document, I assume full responsibility for the placement of my child and understand that school personnel will NOT be obligated to make adjustments in the required work of the class, provide additional individual help beyond that which is provided to all students in the class, or to change my child's schedule during the school year, even if he/she is in danger of failing the class or does not require the course to meet graduation requirements. I understand, if the form is approved, a request to rescind the course cannot be honored. I have used due diligence in researching information regarding the course requirements and expectations for the requested course and have reviewed the course sequencing documents on the Kell Registration webpage. I understand that this request will be honored on a space available basis after all students are scheduled and acknowledge this request is for a year-long placement. Mid-year requests to remove the course cannot be honored.*

**By signing your name, you are indicating that you have read the "Agreement Statement" above and assume full responsibility for the placement of your student/self.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Administrative Use:**

**Approved/Denied** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_