Course Choice Parental Request Form [Template]

Parent/Student Information

Please complete the following information for the parent and student.

Parent's Name	
Parent's Email Address	
Parent's Phone Number	
Student's Name	
Student's Grade Level	

Requested Course Information

Please complete the following information for each course provider and the requested courses.

Course Title(s)	Name of Course Provider		

	Office Use On	ly
Date received : Revie	ewed by:	Date of Parent Consultation:

Final Course Choice Status

Course Title	Name of Provider	Final Status	Priority Alignment
		Accepted -	Priority 1
		Accepted -	Priority 1
		Accepted -	Priority 1
		Accepted -	Priority 1 -

Priority	Description
1	Seniors who require a course in order to graduate or student access to TOPS aligned courses not available through the school or school system.
2	Students enrolling in courses required to complete an associate degree in a Fast Forward pathway or a certificate of technical studies aligned to high wage, high demand jobs or work-based learning.
3	Students seeking access to TOPS aligned college credit.
4	Students enrolled in a Comprehensive Intervention Required (CIR) or Urgent Intervention Required for Academics (UIR-A) schools.
5	Access to high quality academic content aligned to graduation requirements or access to high quality career and technical content aligned to the Louisiana IBC state focus list which can be offered as recovery credit.
6	Students seeking coursework to increase a student score on a nationally recognized assessment (ACT, SAT, CLT, WorkKeys, or ASVAB) as defined in LAC 28:XI.1711 Bulletin 111.
7	Other priorities defined by the school system, approved by LDOE, and included in the School System's pupil progression plan prior to the student enrollment process.