

HEIGHTS TERRACE ELEMENTARY/MIDDLE SCHOOL

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Mr. Frank L. Walton
Principal

Dr. Francis X. Antonelli
Superintendent of Schools

Ms. Debbie Faith Kupsho
Assistant Principal

Dr. Craig Butler
Asst. Superintendent of Schools

Mr. George Donadi
Director of Elementary/Middle Education

Grade changes and/or omissions must be made using the form below. Complete ALL sections as they apply to your change. Use one form for each grade change. **Forms must be SIGNED by both the teacher and the Principal/Assistant Principal.** Submit all completed forms to your grade level secretary.

GRADE CHANGE REQUEST FORM

Course Number _____ Section Number _____ Class Period _____

Course Title: _____ Grade Level _____

Student Number _____ Student Name _____

Marking Period: ____1 ____2 ____3 ____4 School Year _____

____ Grade Change ____ Grade Omission ____ Withdrawal ____ Name not on roster

OLD GRADE _____ NEW/OMITTED Grade _____ COMMENT _____

REASON FOR CHANGE _____

TEACHER'S SIGNATURE _____ DATE _____

PRINCIPAL'S SIGNATURE _____ DATE _____