

PROGRAM OF CHOICE (POC) CHANGE/DROP FORM

Effective for 2018-2019 School Year

Student's Name: _____ ID #: _____ Current Grade: _____

Current School Name: _____ Zoned for: _____

Current POC: _____

Current Strand/Track: _____

Strand/Track you want to change to (for current 9th graders only): _____

Intend to withdraw from the POC altogether: _____ Yes _____ No

Step #1... Student's reason for wanting to change/drop Program of Choice.

Step # 2... Parent's comments/recommendation regarding student's request:

Step # 3... Career Specialist's or IB/AICE Coordinator's Review regarding student's request:

Student Signature

Date

Parent Signature

Date

Final Review by:

Date

Approved / Disapproved

Career Specialist or IB/AICE Coordinators –
complete and give form to Career Specialist & Theresa Dodd

Action Taken: _____