

COLEYTOWN MIDDLE SCHOOL
255 North Avenue
Westport, CT 06880
(203) 341-1600

Kris Bienkowski, Principal
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<p>Statement of Understanding Registration in Non-Recommended Course</p>
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Dear Parent:

You have requested enrollment in a class for which your child was not recommended. Some potential problems and consequences, which may result from this action are:

- The pace of the class may be inappropriate for your child.
- The content may be too difficult.
- It may be difficult for your son / daughter to change to a different course or level after the start of school next year due to schedule and space limitations. Therefore, he / she may have to cope with an inappropriate placement for the entire year.

Students may not earn a grade which they consider satisfactory despite their best efforts. After having discussed this with your son or daughter, please indicate by signing below that you are aware of the possible consequences, and that you still wish to enroll your son or daughter in a class for which he/she was not recommended. Waiver forms are due to your child's counselor by **March 31, 2010**.

Student Name: _____ Counselor: _____

Recommended For: _____ By: _____

Requested course through waiver process: _____

Parent/Guardian Signature Required: _____ Date: _____