



TRENTON CATHOLIC ACADEMY

The Upper School at McCorristin Campus

175 Leonard Avenue ♦ Hamilton, NJ 08610-4899

P: (609) 586-3705 ♦ F: (609) 586-6584 ♦ www.trentoncatholic.org

Dear Parent/Guardian,

This form acts a parental waiver form regarding your child’s course placement next year:

Student’s Name _____

Student Grade _____

Student’s current Course _____

Student’s requested Course _____

Reason for

Request _____

Student Signature _____

Parent Signature _____

Current Course Teacher’s Signature _____

Transfer Course Teacher’s Signature _____

Guidance Counselor Signature _____

Acting Director/President Signature _____

Please note: As you have stated that it is in the best interest of your child to take the course to transfer your child to an honors level class, against the recommendations of his or her prior teacher, we ask that you and your child sign this form. This acknowledges that you have been made aware of his/her recommended placement, but still have chosen to still have him/her take the honors level class. Please return this waiver to the Guidance Department as soon as possible so your child’s schedule for next year can be finalized. If you have any questions regarding this please do not hesitate to call me at (609) 586-3705 X 130.

Thank you.

Lisa Ford
Guidance Counselor