



## Request to Change Instructional Models for Extenuating Circumstances

Please fill out one form for each student for whom you are requesting an instructional model change. **Please complete the form, then print and deliver or email to the appropriate campus.** Please write legibly.

Name of Student \_\_\_\_\_ Student ID Number \_\_\_\_\_  
*First Name MI Last Name*

Name of Parent/Guardian Initiating this Request \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Which campus is this student's home campus? \_\_\_\_\_ Grade Level \_\_\_\_\_

Which model of instruction is this student currently receiving?

Face to Face Instruction     Remote Instruction

Which model of instruction do you want to transition your student to?

Face to Face Instruction     Remote Instruction

All Aledo ISD students will have the flexibility to change instructional models at the end of each grading cycle (9-week period). While it is optimal to minimize the movement between instructional models, we recognize that some families may have an extenuating circumstance and may require a change earlier than the end of the grading cycle. As a result, Aledo ISD will allow families to make this change during a grading cycle, one time per school year. Due to serious staffing implications, as well as student scheduling issues that arise from movement within the grading cycle, the more notice a family can give a campus the better it will help the campus prepare. Please detail the reasons why your student needs to transition before the end of the grading cycle.

- Upon receipt of the form, a campus administrator will be in contact with you.
- Parent/guardian and campus administration will determine the first day of the alternate instructional model.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Submit Form:**

You can fill out the form, print and deliver to the appropriate campus.

If you would like to email this form, first fill out the form, save a copy to your computer and attach the form to an email. Email the form to the appropriate individual at your student’s home campus.

Campus	Email Recipient
Coder Elementary	asadler@aledoisd.org
McCall Elementary	jbean@aledoisd.org
Stuard Elementary	rshelton@aledoisd.org
Vandagriff Elementary	scovington@aledoisd.org
Walsh Elementary	helgin@aledoisd.org
McAnally Intermediate	chmcclure@aledoisd.org
Daniel Ninth Grade Campus	cansley@aledoisd.org
Aledo High School	tmaurer@aledoisd.org
Aledo Learning Center	cjones@aledoisd.org

***For office use only:***

\_\_\_\_\_  Approved  Denied  
Principal Signature Date

If denied, keep at campus. If approved, send to Amber Crissey for final approval.

\_\_\_\_\_ Date  
Amber Crissey, Assistant Superintendent of Curriculum & Instruction

Final Approval  Denied

First day of instruction in the new model \_\_\_\_\_