



Bishop McDevitt High School
125 Royal Avenue
Wyncote, PA 19095-1198

Office of Academic Affairs

Roster Change Request Form - \$60.00 Charge

Student: Last name _____

First name _____

Phone Number: _____

Email: _____

All Roster change requests will be reviewed by administration. You will be notified if the change was able to be made. Changes in lunch periods will only be considered for medical reasons and the request must be accompanied by a doctor's note.

Course to be dropped: _____

Reason for drop: _____

Course to be added: _____

Reason for add: _____

Student Signature: _____

Parent Signature: _____

***This form MUST be received in the Academic Office no later than
Monday, August 30, 2019 at 12 noon.***