

**LONNIE JACKSON ACADEMY**

***REQUEST TO CHANGE INSTRUCTIONAL SETTING***

Parent's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Special Education:  Yes  No

Teacher's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student's current days absent: \_\_\_\_\_ Student's current days tardy: \_\_\_\_\_

Student's current grades (last progress report/report card)

\_\_\_\_\_ Math

\_\_\_\_\_ Language Arts

\_\_\_\_\_ Reading

Current Instructional Setting:  Virtual  Traditional (face-to-face)

Requested Change of Instructional Setting:  Virtual  Traditional (face-to-face)

In the space below, please describe the details that justify this change. Submit your completed request to the LJA front office staff at your convenience. Include supporting documentation for this change. **NOTE: No request will be considered unless it is complete. Your completed request will be considered and a decision will be made in 2-3 business days. You will be notified by phone of the final decision.**

Empty space for describing the details that justify the change.