SCHOOL DISTRICT NO. 53 (Okanagan Similkameen)

COURSE CHALLENGE APPLICATION FORM

	Date:
Name:	Grade:
Course/Subject Being Challenged:	
Reasons for the Challenge. Describe in detail vindicated above at your school	why you wish to challenge the course
Action Plan. Include a brief description of how study. (This is to be completed co-operatively by	
(Student Signature)	(Course Teacher Signature)
(Parent Signature)	(Administrator)