

**RICHARD MONTGOMERY HIGH SCHOOL REQUEST FOR
STUDENT ASSISTANT POSITION**

Guidelines:

- Students will not receive credit for being a student assistant.
- Student may only be an assistant for one period per semester. *If a student is dropping a full year course then a student must find an aide position for both semesters (please complete two forms).*
- Student is responsible for finding a student assistant position.
- Student is expected to attend, be on time, carry out assignments, and manage their behavior as covered by the school discipline policy.

To be considered for a student assistant position, please complete Part 1 and give it to the resource teacher of the department in which you choose to serve. Give the form to your counselor upon completion of parts 1, 2 and 3 (if appropriate).

Part 1 STUDENT ASSISTANT

Name _____ Grade _____ Date _____ School Year _____

Student ID# _____ Counselor _____

Name of current course to be dropped _____ Period _____ Semester _____

Please notify your current teacher of your intent to drop the course--> Teacher notification _____
(TEACHER SIGNATURE)

Parent Approval (required) _____ Date _____
(SIGNATURE)

By signing below, I agree to the guidelines for a student assistant position and will continue attending the class that I'm requesting to drop until I get a copy of the schedule change from my counselor. If I leave class before this process is finalized, I risk earning an E in the class.

Student Signature _____ Date _____

Part 2 DEPARTMENT ACCEPTING STUDENT ASSISTANT

To be completed by the department accepting the student assistant.

Department _____ Teacher Assignment _____ Room _____
(PRINT)

Teacher Approval _____ Resource Teacher Approval _____ Date _____
(SIGNATURE) (SIGNATURE)

Part 3 25th DAY WITHDRAWAL (S1/October 3, 2023 and S2/March 4, 2024)

If this request is processed after the 25th day of the semester a withdrawal grade must be recorded on the report card. Please have the teacher whose class you are dropping complete the following:

Course Name _____ Course Code _____ Grade at time of withdrawal _____

Teacher Name _____ Teacher Signature _____ Date _____
(PRINT)

Part 4 TO BE COMPLETED BY THE COUNSELOR

Counselor Signature _____ Date Completed _____

Section Code _____