



Lebanon High School
Foreign Language Drop Form

Today's Date: _____

Student's Name: _____

Student's Email Address: _____

Class you would like to drop: _____

What grade are you in? _____

IN ORDER TO ATTEND A FOUR YEAR UNIVERSITY, YOU MUST COMPLETE TWO CONSECUTIVE YEARS OF FOREIGN LANGUAGE. BOTH YEARS MUST BE IN THE SAME LANGUAGE. PLEASE CONTACT YOUR SCHOOL COUNSELOR IF YOU HAVE ANY QUESTIONS.

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Parent's **PRINTED** Name: _____

Counselor's Signature: _____ Date: _____

PLEASE RETURN THIS FORM TO YOUR COUNSELOR FOR PROCESSING!