

## RIVER VALLEY SCHOOL DISTRICT

660 West Daley Street

Spring Green, Wisconsin 53588

345.12 - Exhibit 3

Phone: 608-588-2551

## Principal's Response to Request for Grade Change

Teacher's Name:		
Student's Name:		
Class:		
Date of Conference:		
Persons Attending Conference:		
I have reviewed the request for a grade change and the reasons for which the change is requested. information and the information discussed at the conference, I have decided that a change in grade not) justified for the following reasons (attach more sheets, if necessary):	Based on that e (is) (is	

Principal's Signat	ure	Date	
Date Sent/Delivered to Parent/Student:			
Date Sent/Delivered to Teacher:			
APPROVED:	May 27, 1999		