

Teacher's Aide Request form

Your Name _____ Your Student # _____

1. This form is **due** to the counseling office by **Feb. 13, 2015.**
2. To be a Teacher's Aide next year you must have this form signed by the teacher you will TA for.
3. ***When you enter your class requests in Skyward, TA will not be available.*** Please select another elective class as a space filler.
4. **Before you turn this form into the Counseling Office, you must have all of your classes entered in Skyward!** After you turn this form in to the Counseling Office, a counselor will change your class over to TA.

Teacher you will TA for next year:

Print _____ Sign _____

***Class you entered into Skyward that you want to have replaced with TA _____**

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