EXPLORE CTE

ADD OR DROP FOR AN EXPLORE CTE STUDENT FROM A SYNERGY ROSTER *DURING* THE TERM/SEMESTER

PLEASE COMPLETE ALL FIELDS TO ENSURE PROPER GRADE REPORTING

Student Name	*Student ID#*	*Home School*	*CTE Site*	*Add/Drop*	*Start Date*	*End Date*	*Earned Grade*	*Submitter Name*

Today's Date: _____

1. Have you notified the parent of this request to add or drop the above Explore CTE student(s) _____
2. Have you notified your site counselor of this request to add or drop the above Explore CTE students_____

Please contact Valarie Williams, CTE department, 916.793.2960 with questions