

For Office Use Only:  
Data Entry Date: \_\_\_\_\_  
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**Independent Study Program  
Portland State University  
Change of High School Form**

**Directions: Print except where a signature is required.**

**Mail to:** Portland State University  
Office of Independent Study  
PO Box 1491, Portland, OR 97207

**Fax to:** 503-725-4880

**REQUEST TO CHANGE MY RECORD**

<b>Today's Date</b>	
<b>Enrolled student's name</b>	
<b>Student's current address</b> Street # and name City, State, Zip	
<b>Student's current phone number</b>	
<b>Student's current email address</b>	
<b>I am currently enrolled in these Independent Study courses:</b>	
<b>Previous High School Name</b>	
<b>New High School Name</b>	
<b>New High School Address</b> Street # and name City, State, Zip	
<b>New High School Phone Number</b>	

**I have changed to a different high school than the one I was attending when I enrolled in my Independent Study course(s). I need my grade(s) sent to my new high school.**

**Student's Signature (or their guardian's)**

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**Printed Name** \_\_\_\_\_