



LIBERTY HILL MIDDLE SCHOOL
ASSIGNMENT REDO REQUEST FORM

Student: If you would like to request the opportunity to redo an assignment for which you received a failing grade, please complete this form and submit it to your teacher within 10 days of the date the failing grade was posted in the electronic grade book.

Date: _____

Student Name: _____

Teacher Name: _____

Course Name: _____

Assignment: _____

Grade Received: _____

Why do you believe you earned this grade? _____

What are you doing to improve your understanding of this material and your performance on this assignment?

When have you scheduled to attend tutorials to redo the assignment?

Student Signature: _____

Parent Signature: _____

Teacher Signature & Date: _____