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: __________________________