



## Request to Correct Student Schedule for Independent Study

This form is to be completed by the school staff when Independent Study (IS) section(s) was/were not scheduled prior to the student’s absences and the MiSiS team needs to make the section corrections. Users must open an online ticket at <https://lausd-myit.onbmc.com> select *Request Software Application Technical Support* and attach this fully completed form along with the requested documents. For further assistance or questions call the MiSiS Helpdesk at (213) 241-5200 Option 8.

**All fields are required. Please print or type all information.**

Student Name (Last, First, Middle): \_\_\_\_\_ 10 Digit District ID#: \_\_\_\_\_

IS Duration (Days): \_\_\_\_\_ Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Regular Class Section #: \_\_\_\_\_ Title: \_\_\_\_\_ End Date: \_\_\_\_\_

IS Class Section #: \_\_\_\_\_ Title: \_\_\_\_\_ Begin Date: \_\_\_\_\_

Date the Master Agreement was signed by all involved: \_\_\_\_\_

Please provide a reason for the requested changes.

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**All items below must be checked off:**

- The **Master Agreement** is for a minimum of **five** instructional days.
- The following forms from BUL-6779 were used:
  - Master Agreement**
  - Record of Assignments**
- The **Master Agreement** includes accurate instructional dates.
- For short-term independent study, the **Master Agreement** assignment due date is the student’s scheduled date of return to the classroom.
- The **Master Agreement** contains all signatures (student, parent/guardian, teacher, and other if applicable assisting person).
- The **Master Agreement** was completed and signed prior to the student’s absences.
- The dates on the **Master Agreement** and **Record of Assignments** match.
- The completed work samples are graded/evaluated.

**Submit the following documents:**

- This completed form
- Completed Master Agreement
- Completed Record of Assignments
- Completed work samples
- Schoology Assignments and Scores (Optional)

Principal’s Signature: \_\_\_\_\_

Principal’s LAUSD Email Address: \_\_\_\_\_

Name of HelpDesk Agent, if known \_\_\_\_\_ Ticket Number \_\_\_\_\_

(Required)