



Course Selection Form

Name: _____ Grade: _____ Phone #: _____

_____ Street Address _____ City _____ Postal Code

Please check the courses that you have taken and wish to take next year. (T=Taken, R=Requested)

English		15 credit required		Science		10 credit required		Fine Arts			
T	R	Course	Credits	T	R	Course	Credits	T	R	Course	Credits
		English 10-1	5			Science 10	5			Art 10	3
		English 10-2	5			Science 14	5			Art 20/30	5
		English 20-1	5			Science 24	5			Drama 10/20/30	3
		English 20-2	5			Science 20	5			Choir 10/20/30	5
		English 30-1	5			Biology 20	5			Band 10/20/30	5
		English 30-2	5			Chemistry 20	5				
						Physics 20	5				
Math		10 credit required				Science 30	5			Options	
T	R	Course	Credits			Course	Credits	T	R	Course	Credits
		Math 10C	5			Biology 30	5			Const.Tech 10/20/30	3
		Math 10-3	5			Chemistry 30	5			Foods 10/20/30	3
		Math 20-1	5			Physics 30	5			Fashion 10/20/30	3
		Math 20-2	5	T	R	Second Language				Comm Tech 10/20/30	3
		Math 20-3	5			French 10	5			Photography 10/20/30	3
		Math 30-1	5			French 20	5			Sports Medicine	3
		Math 30-2	5			French 30	5			Sports Perf 10/20/30	3
		Math 30-3	5							Work Experience	3-10
		Math 31	5	T	R	Spanish 10	5			RAP	10-20
						Spanish 20	5				
						Spanish 30	5				
Social		15 credit required								Religious Studies	
T	R	Course	Credits							Course	Credits
		Social 10-1	5			Phys-Ed/5 Credit				CALM (req)	5
		Social 10-2	5	T	R	Phys-Ed (req)t	5			Rel. Ethics 20 (req)	3
		Social 20-1	5			Phys-Ed 20	5			World Rel. 30 (req)	3
		Social 20-2	5			Phys-Ed 30	5				
		Social 30-1	5								
		Social 30-2	5								

* Alternate option requests (choose at least 2) = _____

Student Signature: _____ Parent Signature: _____

* Note that while the above represents all possible courses that might be offered for next year, the school retains the right to not offer a course if insufficient requests are received or a staff member is not available who has the necessary credentials and experience to offer the course in an effective manner.