

Sophomore Course Selections

Student Name: _____

Parent Phone: _____

Parent Signature: _____

You MUST complete your course requests and alternates in your StudentVue and return this completed form to your Seminar teacher on JAN 29th. Parent signature is required.

Course Options

I am interested in the following:

____ EFA (Evening)

____ EFA (Online)

____ Early Middle College (5th Year)

Requirements

Business.....1.0

English.....4.0

Math.....4.0

Science.....3.0

Social Studies.....3.5

PE/Health.....1.0

Visual/Perf./Applied Arts.....1.0

World Language2.0

Course #	Dept	Course Title	Credit	Teacher Signature, if required
	ENGLISH	ENGLISH 10 A / 11 A	.5	
	ENGLISH	ENGLISH 10 B / 11 B	.5	
	MATH		.5	
	MATH		.5	
	SCIENCE		.5	
	SCIENCE		.5	
	SOCIAL ST	US HISTORY OR A.P.	.5	
	SOCIAL ST	US HISTORY OR A.P.	.5	
			.5	
			.5	
			.5	
			.5	
			.5	
			.5	
			.5	
Total			7.5	
Alternate:			.5	
Alternate:			.5	
Alternate:			.5	

NOTES: