



# Horizon Middle School

GRADE

# 6

## Scheduling Registration Worksheet

Name: \_\_\_\_\_

School: \_\_\_\_\_

**REQUIRED COURSES:** *All Student will have the following courses:*

English 6

Social Studies 6

Science 6

Math 6 - Test scores and teacher recommendations will determine the appropriate math course

Reading 6

Physical Education 6

Digital Literacy 6

**ELECTIVES:**

Students may choose ONE of the following options for elective courses:

*\*Students who are identified through MAP scores and teacher recommendation will be placed in an intervention course. Intervention courses will replace elective options. Students will receive a letter indicating which intervention course(s) they have been placed in.*

Option 1	Option 2	Option 3
<p><u>2 Full Year Electives</u></p> <p>___ Band 6</p> <p>___ Choir 6</p> <p>___ Orchestra 6</p> <p>___ AVID 6</p> <p>(Interview process for new members)</p> <p><b>Please list instrument:</b></p> <p>_____</p>	<p><u>1 Full Year Elective &amp; 2 Semester Electives</u></p> <p>Choose 1:</p> <p>___ Band 6</p> <p>___ Choir 6</p> <p>___ Orchestra 6</p> <p>___ AVID 6 (<u>Second Semester ONLY</u>)</p> <p>Choose 2 (rank in order of preference):</p> <p>___ FACS 6*</p> <p>___ Art 6*</p> <p>___ STEM 6*</p> <p>___ Exploring World Cultures 6</p> <p>___ Physical Fitness 6</p> <p>___ Technology Innovation 6*</p> <p><b>*Lab Fee (paid during the school year)</b></p> <p>If your selected electives are unavailable, please provide two alternative choices in order of preference.</p> <p>1. _____</p> <p>2. _____</p>	<p><u>4 Semester Electives</u></p> <p>Choose 4 (rank in order of preference)</p> <p>___ Art 6*</p> <p>___ Exploring World Cultures 6</p> <p>___ Physical Fitness 6</p> <p>___ FACS 6*</p> <p>___ Technology Innovation 6*</p> <p>___ STEM 6*</p> <p>If your selected electives are unavailable, please provide two alternative choices in order of preference.</p> <p>1. _____</p> <p>2. _____</p> <hr/> <p><b>Special Education</b></p> <p>Please indicate if your child is receiving special education services under an Individualized Education Plan (IEP)</p> <p>___ Yes ___ No</p>

Parent/Guardian Signature: \_\_\_\_\_