Heritage High School
2020-2021 Junior
Student ID# _____

Course Request Form
DUE JANUARY 31, 2020
Please Print Clearly

SLC	Counselor

Student Name:_____, _____, ____ ____/____/_____
Last Name First Name MI Date of Birth

Phone: **Parent Email:**

Check if participating in:
☐ ELD ☐ IEP/Sped
☐ 504 ☐ Other: _____

Please Check Academy Interest:
☐ Public Services ☐ Health
☐ Technology ☐ Arts and Entrepreneurial

READ all directions BEFORE you begin:

A. Put an **X** next to the required course you wish to take for classes 1 and 2.
B. Write in math class for #3. To be confirmed by teacher recommendation and placement data.
C. Choose electives to fill classes 4-8 using the Course Offering list. List Instrument you play in Sem 2 for Band Classes.
D. For year-long classes, you are **committing** to staying in the class for the whole year.
E. If you want a semester class, you need to choose one for both semesters. Write them under semester 1 & 2 columns.
F. If you want to **repeat** a class for a higher grade or failed the class, write it in for the semester(s) you want to take it. For example, if you want to repeat English 9 first semester, write it in under the semester 1 column and choose another semester class from the list to fill in semester 2. **Use the correct codes from the course offering list**
G. **Prerequisites (requirements for class)**: Must be met to sign up for any class that requires them. (See back of form)

BUILD YOUR COURSE SCHEDULE

(These are **requests only**; request **does not guarantee** any course, specific day, period or order of classes)

COURSE REQUEST FORM

Required Courses: **Total credits required for high school graduation: 270**

	Semester 1		Semester 2	
	Course #	**Course Name**		
1	5280 5290	___ US History ___ AP US History		
2	3050 3085	___ English 11 ___ AP Eng Lang and Composition		
3		Add Math Class		
Electives:				
	Semester 1		**Semester 2**	
	Course #	**Course Name**	**Course #**	**Course Name or Instrument Played for Band Class**
4				
5				
6				
7				
8				
Alternates:	***Write in 4. If 4 alternates are not listed, you will be placed in classes where room is available***			
1				
2				
3				
4				

APPROVAL: By signing below, you **agree** to remain enrolled in the above requests for the **duration** of the course

_____ _____ ___/___/____
Student Signature Parent Signature Date