

Course Request Form

SLC	Counselor
ID#	

Please Print Clearly

Student Name: _____
Last Name / First Name MI

Last School: _____

Phone: _____

Parent Email: _____

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

Do you have a sibling at Heritage? Yes ___ No ___

Sibling's Name _____ SLC _____
 Sibling's Name _____ SLC _____
 Sibling's Name _____ SLC _____

READ all directions BEFORE you begin:

- A. Classes 1- 5 are required.
- B. Put an **X** next to the required course you wish to take for class 4.
- C. Choose a semester only class to complete the health class selection (# 5).
- D. Study Hall is **highly recommended for freshmen**. Put an X next to Study Hall or write in an elective choice (#6).
- E. Choose electives to fill classes 7-8 and the 4 alternate classes using the Course Offering list. Include Instrument played under Sem 2 for band classes.
- F. For year-long classes, you are **committing** to staying in the class for the whole year.
- G. If you want a semester class, you need to choose 1 for both semesters. Write them under semester 1 & 2 columns.
- H. **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	3030	English 9				
	2	5750	PE 9				
	3	5020	The Living Earth (Biology)				
	4	4630/4565	___ P- Algebra 1 plus Algebra Support (2 classes)				
		4630	___ P- Algebra 1				
		4670	___ P- Geometry				
			___ Other _____				
5	2700	Health	Add Sem Class →				
Electives:							
	Semester 1			Semester 2			
	Course #	Course Name		Course #	Course Name or Instrument Played for Band		
6	7680	___ Study Hall <i>Highly Recommended</i> or _____					
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 _____

