

Name: _____

Phone #: _____

Please complete the course selection below, include final grade & percent level beside each course (use estimates when required).

2008 – 2009				2009 - 2010		
JALC COURSES COMPLETED	GRADE LEVEL	FINAL GRADE	FINAL %	COURSES SELECTED	GRADE LEVEL	PRIORITY FOR NEXT YEAR
Eg. English	9	C+	68%	English	10	1 st
Mathematics (select only 1 below)				Mathematics (select only 1 below)		
Essentials of Math				Essentials of Math		
Principles of Math				Principles of Math		
English				English		
Social Studies				Social Studies		
Science				Science		
Health and Career 8, 9				Health and Career 8, 9		
Planning 10				Planning 10		
Physical Education				Physical Education		
OTHER COURSE CREDITS THIS YEAR: Internal and external credits.				ADDITIONAL COURSES: Interest levels of students determine which courses are offered each semester.		
ADDITIONAL COURSES IN 2008-2009 SCHOOL YEAR	GRADE LEVEL	FINAL GRADE	FINAL %	ADDITIONAL COURSES FOR 2009-2010 SCHOOL YEAR	GRADE LEVEL	PRIORITY FOR NEXT YEAR
				Fine Arts	8/9/10	
				Visual Arts (Fridays Only)	9/10	
				Fine Arts (Fridays Only)	11	
				Biology	11	
				Chemistry	11	
				Communications	11	
				Earth Science	11	
				English	11	
				Mathematics	11	
				Social Studies	11	
				Human Services (Leadership/Restorative Action)	11A/B/C	
				Civics	11	
				Comparative Civilization	11	
				Physical Education	11	
				Law	12	
				Social Justice	12	
				Work Experience	12 A/B	
				Learning Resource Centre (Maximum 4 blocks per week)	___ blocks	

NOTICE TO PARENTS

Please review your child's course selections for next year and the course requirements **carefully**. Refer to the **Course Planning Book** for additional information. Please sign and have your child return this form to Sonya in the Office by May 14th, 2009. Some elective areas fill up quickly and interest levels determine which courses are offered each semester. If you have any questions, please contact Ross Wartnow (Counsellor) at 604-532-8599.

If you have registered and have completed the course planning for your child at another school, please indicate the school they will be attending and sign. Thank you.

School for September: _____

Parent/Guardian Signature: _____

When possible, students will be given their first choice classes, however due to timetabling and class size limitations, students may need to make other choices.

Parent/Guardian Signature: _____

Student Signature: _____