

West High 10th Grade Course Selections

Last Name (Print)	First Name (Print)	ID#	Due Date
	Please see the reverse side	and Science <u>plus on</u> de of this sheet for co	<u>e elective</u> .
PLE	ASE PRINT CLEARLY AND CARE	FULLY COURSE TITLES AN	ID COURSE NUMBERS.
SUBJECT	COURSE TITLE	COURSE #	TEACHER SIGNATURE IF REQUIRED
English			
Math			
Chemistry/ Physics			
P.E.			
World History			
Elective			
Elective Alternate #1			
Elective Alternate #2			
Elective Alternate #3			
I agree with my student's course and alternate selections. I understand that my student's schedule will not be changed once the school year begins.			
I understand the additional rigor involved in Advanced/Enhanced/AP classes and am aware of any summer assignments (Student Initials).			
Parent Signat	ure Parent Cell #	Student Cell #	Student Signature