

## PEARL CITY HIGH SCHOOL NAME REGISTRATION

NAME:	

GRADE 11 2024 IBAD CAHSL TND

1 ACADEMY	Select 1 Program of Study. Rank #1 – 3, with 1 being your first choice – within ONE Program of Study*					
ACADEMY OF INTERNATIONAL BUSINESS & DESIGN  Counselor initials*	ARTS & COMMUNICATION PROGRAM OF STUDY  Graphic Design Tech 1 Digital Media Tech 1 Fashion Design 1	BUSINESS PROGRAM OF STUDY  Accounting Business Law Marketing				
ACADEMY OF CULINARY ARTS, HEALTH SCIENCES & LEADERSHIP  Counselor initials*	HEALTH SERVICES PROGRAM OF STUDY  Advanced Health Services	PUBLIC & HUMAN SERVICES PROGRAM OF STUDY  Culinary 2 Hospitality Career & Customer Svc Teaching as a Profession 1				
ACADEMY OF TECHNOLOGY & DESIGN Counselor initials*	INDUSTRIAL / ENGINEERING TECHNOLOGY PROGRAM OF STUDY  Architectural Design 1 Cyber Security Engineering Technology 1 Residential & Commercial Construction 1	NATURAL RESOURCES PROGRAM OF STUDY  Natural Resources & Wildlife Management 1				

## \*See your counselor if you are requesting to change your Academy or Pathway

COURSE	COURSE TITLE	ACCN CODE	CR	(FOR SCHOOL USE ONLY) COURSE LEVEL		
	Circle one:					
2 LANG ARTS	ENGLISH LA 3	LCY3010	1.0	E	Sped Resource	Sped FSC
	AP ENGLISH LANGUAGE Approval	LAY6010	1.0	ELL		
3 SOCIAL STUDIES	MODERN HIST OF HAWAII / PART. IN DEMOCRACY	CHR1100 CGU1100	0.5 0.5	ELL	Sped Resource	Sped FSC
4 MATH	Math teacher initials:		1.0	ELL	Sped Resource	Sped FSC

5 SCIENCE				1.0	ELL	Sped Resource	Sped FSC	
	Science teacher ir	nitials:						
ELECTIVE COURSES: List in order of preference.								
6	Be sure to get TEACHER APPROVAL (signature/initial on the form) for courses that require it.  6 ALT 2							
			47.50					
7			ALT 3					
ALT 1			ALT 4					
I plan on taking SUMMER SCHOOL: YES or NO If Yes, Course:								
If a registration form is NOT SUBMITTED by the due date, courses will be selected for the student and no program changes will be allowed.								
Student Signature		Parent Signature				Date		