12 **Please return to your teacher by _____**

Blue Springs South High School
2009-2010 Course Request Form
(please print all information in pencil)

Career Pathways
Please check one. Refer to pages 17-29 in the course description book.
- ☐ Art/Communication
- ☐ Business Management
- ☐ Health Services
- ☐ Human Services
- ☐ Industrial & Engineering Technology
- ☐ Natural Resources

Last Name _____ **First Name** _____ **Home Phone** _____

COURSE REQUESTS

COURSE NUMBER	COURSE TITLE	CREDIT	I HAVE MET THE PREREQUISITE	TEACHER APPROVAL
1503	**Personal Finance**	**.5**	☐	
			☐	
			☐	
			☐	
			☐	
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			☐	
			☐	
			☐	
			☐	

ALTERNATES

You must choose 5 alternate courses that may be used to resolve scheduling conflicts. Please choose alternates carefully, they will not be allowed to be changed.

COURSE NUMBER	COURSE TITLE	CREDIT	I HAVE MET THE PREREQUISITE	TEACHER APPROVAL
			☐	
			☐	
			☐	
			☐	
			☐	

Student Signature _____

Parent Approval Signature (required) _____

Case Manager Signature (required if student has an IEP) _____

As a senior, you have the option of participating in the 8th semester release program.

Are you interested in this program?
□ Yes □ No _____Student's initials

Course selections are final. There will be no schedule changes in the fall.