12

Please return to your teacher by _____

Blue Springs High School
2010 -2011 Course Request Form
(please print all information in pencil)

Career Pathways
Please check one. Refer to pages 17-29 in 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	TITLE	CREDIT	I HAVE MET THE PREREQUISITE	TEACHER APPROVAL
1503	**Personal Finance**	**.5**	☐	
	Communication Arts		☐	
			☐	
			☐	
			☐	
			☐	
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			☐	
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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	TITLE	CREDIT	I HAVE MET THE PREREQUISITE	TEACHER APPROVAL
			☐	
			☐	
			☐	
			☐	
			☐	

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

_____ _____ _____ _____

Parent Approval Signature (required) **Student's Signature** **Adv. teacher** **Counselor**

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