

# St. Patrick Catholic High School

## Course Selection Form

2014-2015 · Grade 7

OFFICE USE ONLY

Rec'd: \_\_\_\_\_

Sch'd by: \_\_\_\_\_ Date: \_\_\_\_\_

Dear Parent/Guardian:

Welcome to St. Patrick Catholic High School! In preparation for next school year, it is time to decide your child's coursework for the 2014-2015 school year. Please complete this form to determine what courses your child should take. Upon completion, please sign and return this form with your registration fee.

Student's Name \_\_\_\_\_

\*Based on teacher recommendation, student GPA, and/or PLAN/ACT scores.

Phone Number \_\_\_\_\_

**Religious Studies**       Religious Studies 7

**English**                       English 7

**Science**                       Science 7

**Math (choose 1)**       Pre-Algebra\*                       Math 7

**Social Studies**               Social Studies 7

**Enrichment**                       Enrichment

**Electives (choose 1)**       Physical Education                       Football                       Basketball

Band

Please sign below acknowledging your agreement to the above classes for the 2014-2015 school year. Please note that students' schedules will not be changed after August 22. This deadline also applies to semester classes that do not begin until January.

  X    
Parent/Guardian Signature

  X    
Student Signature