

Student Name (print) _____ Due Date _____

Freshman Course Requests for the 2020-2021 School Year

McQueen Course Catalog: www.washoeschools.net/mcqueen

The courses you select will be used to create your class schedule. Please make your choices carefully as changes may not be possible. Remember – you are selecting courses, not teachers.

Required Courses

English (full year class) – You must choose one <input type="checkbox"/> (1201-1202) English 1-2 <input type="checkbox"/> (1203-1204) Honors English 1-2* <input type="checkbox"/> Other _____ Course # _____	Math (full year class) - You must choose one <input type="checkbox"/> (2201-2202) Algebra 1 S1-S-2 <input type="checkbox"/> (2215-2216) Formal Geometry 1-2 (Honors)* <input type="checkbox"/> Other _____ Course # _____
Science (full year class) – You must choose one <input type="checkbox"/> (3141-3142) Biology 1-2 <input type="checkbox"/> (3143-3144) Honors Biology 1-2* <input type="checkbox"/> Other _____ Course # _____	<input checked="" type="checkbox"/> PASS (Personal and Academic Skills for Success) Required for all 9 th graders

Elective and other Required Courses

- Use the course catalog in planning your classes, pay attention to graduation requirements (PE, Health, Digital Thinking, World Geography [fulfills World History requirement], Art/Humanities/CTE).
- Full year courses have 2 course numbers: the first is for first semester, the second number is for second semester. You must list both numbers. Course numbers are in the course catalog.

First Semester: <i>Arts/Humanities/CTE/Health/PE/ROTC</i>	Second Semester: <i>Arts/Humanities/CTE/Health/PE/ROTC</i>
EXAMPLE: Fall (6 1 1 1) _____ <i>Art 1</i> _____	EXAMPLE: Spring (6 1 1 2) _____ <i>Art 2</i> _____

- **Students must choose enough classes to fill a total of SEVEN periods.**

First Semester: <i>Arts/Humanities/CTE/Health/PE/ROTC</i>	Second Semester: <i>Arts/Humanities/CTE/Health/PE/ROTC</i>
Fall (_ _ _) _____	Spring (_ _ _) _____
Fall (_ _ _) _____	Spring (_ _ _) _____
Fall (_ _ _) _____	Spring (_ _ _) _____

Alternate Courses

Please select three alternate courses in case you do not receive your first choice electives. **If you leave this blank, we will select electives for you. DO NOT CHOOSE electives that require an application.**

Alternate 1 : Fall (_ _ _) _____	Spring (_ _ _) _____
Alternate 2 : Fall (_ _ _) _____	Spring (_ _ _) _____
Alternate 3 : Fall (_ _ _) _____	Spring (_ _ _) _____

Indicating a career path and diploma option assist in the planning process. Please complete these below.

Career Path _____	Diploma Option _____
-------------------	----------------------

Parent Contact Information

Parent/Guardian Name _____ Contact Number _____

Email (please print legibly) _____

By signing below, I attest that I have read and understand the prerequisites, course descriptions, and possible out of class time requirements of the selected courses.

Parent Signature _____ Student Signature _____