

# COURSE PLANNING & SELECTION 2024-2025 (SR)



Last Name	First Name	Student #	Email: Phone #:	Current Grade
-----------	------------	-----------	--------------------	---------------

Current Courses
1.
2.
3.
4.
5.
6.
7.
8.
9. Off timetable

Requested Grade Courses	Course Code
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9. Off timetable	

<b>Alternative Elective:</b> There is a possibility that the choices above will have to be changed because of conflicts, failures, or insufficient enrolment. Please ensure alternative choices are made.		
1.	2.	3.

**Please Note: If you are definitely taking a Summer School Completion or Remedial course, you must sign up for the next level course i.e. If you are taking SS10 Completion sign up for SS11 next year.**

The Summer School course(s) I will be taking is/are:	1.	2.
--	----	----

- 1) Do you plan to study in the US/UK? Please circle YES or NO.
- 2) What do you plan to study in university/college? \_\_\_\_\_

Any request for changes must be accompanied by parental/guardian approval in writing.

_____	_____	_____
Student Signature	Parent/Guardian Signature	Date

**Return this form to your counsellor by: February 15, 2024**