

WESTVIEW • COURSE REQUEST WORKSHEET

STUDENT LAST NAME	FIRST NAME	STUDENT ID #
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Please do not turn this form into the counseling office.

It is meant to be a guide to help you select your courses for the next school year. You must request your courses on Family Connection. Please visit our website at www.westviewwolverines.com and follow the link to Family Connection.

<input type="checkbox"/> I WANT TO TAKE 3 CLASSES TERM 1 (30 CREDITS) <input type="checkbox"/> 1 ST PERIOD "OFF ROLL" <input type="checkbox"/> 4 TH PERIOD "OFF ROLL" <input type="checkbox"/> I WANT TO TAKE 4 CLASSES TERM 1 (40 CREDITS)	<input type="checkbox"/> I WANT TO TAKE 3 CLASSES TERM 2 (30 CREDITS) <input type="checkbox"/> 1 ST PERIOD "OFF ROLL" <input type="checkbox"/> 4 TH PERIOD "OFF ROLL" <input type="checkbox"/> I WANT TO TAKE 4 CLASSES TERM 2 (40 CREDITS)
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	COURSE TITLE	
1	<input type="checkbox"/> High School English 3-4 <input type="checkbox"/> Honors Humanities 1-2	<input checked="" type="checkbox"/> Use this form as a guide to help you select your courses. <input checked="" type="checkbox"/> Please choose your courses carefully. We will develop classes based on students' requests. <input checked="" type="checkbox"/> Changes requested after Spring course selection may not be possible due to limited space. <input checked="" type="checkbox"/> Requests for specific teachers or periods will not be considered. <input checked="" type="checkbox"/> Elective choices are not guaranteed. Please select two alternatives to each of your elective choices.
2	<input type="checkbox"/> World History 1-2 <input type="checkbox"/> Honors World History/ <input type="checkbox"/> AP European History 1-2	
3	MATH	
4	SCIENCE	
5	PHYSICAL EDUCATION OR ELECTIVE	
6	WORLD LANGUAGE OR ELECTIVE	
7	ELECTIVE OR OFF ROLL	
8	ELECTIVE OR OFF ROLL	

Alternate Elective Choices

1. _____
2. _____
3. _____