

MEDICAL LAKE HIGH SCHOOL
Requests for 2017-2018 School Year
GRADE 10
DUE IN COUNSELING CENTER BY APRIL 28TH TO ENSURE CLASS SELECTION

Last Name	First Name	MI	M/F	Student Cell Phone #
Parent/Guardian Name	Home Phone #	Work Phone #		Cell Phone #

1. English

- English 10
- Honors English 10 *Application/contract due April 28th

2. History

- World History
- AP World History - Application/contract due April 28th
- Aerospace 2 (JROTC)
- Psychology/Sociology (in place of World History)
not recommended for 4yr colleges

3. Math – based on teacher recommendation as well.

- Geometry
- Algebra 2 (pre-requisite Geometry) REQUIRED FOR 4-YEAR COLLEGE
- _____

4. Science

- Biology
- Biology/Animal Science
- Chemistry (pre-requisite Biology)

5. Electives: Please rank eight (8) electives in order of preference (1-8). Please also make sure you pick classes that will help you satisfy graduation requirements and your personal pathway. **All classes are year long.**

Please write your ideal schedule:

1 English _____

2 History _____

3 Math _____

4 Science _____

5 _____

6 _____

Foreign Language

- | | |
|-----------------|-----------------|
| _____ Spanish 1 | _____ Spanish 2 |
| _____ Spanish 3 | |

Career and Technical Education/Vocational

* Many of these courses count as a fine art (FA) credit OR a CTE

- | | |
|---|---|
| _____ Agricultural Communications/FFA | _____ Intro to Culinary |
| _____ Yearbook ALSO Fine Art | _____ Introduction to Engineering ALSO Fine Art |
| _____ AP Computer Science | _____ Leadership ALSO Fine Art |
| _____ Career Focus | _____ Manufacturing |
| _____ Computer Applications | _____ Modern Day Mechanics |
| _____ Digital Design 1 ALSO Fine Art | _____ Multimedia Production ALSO Fine Art |
| _____ Digital Design 2 ALSO Fine Art | _____ Plant Science ALSO Fine Art |
| _____ Human Body Systems (Pre-req Biomed) | _____ Principles of Biomedicine |
| _____ Human Development | _____ Principles of Engineering |
| _____ Industrial Art ALSO Fine Art | _____ Sports Medicine 1 |
| _____ Interior/Fashion Design | _____ Sports Medicine 2 |
| _____ Intro to Business & Marketing | _____ Work Based Enterprises (Student Store) |

Fine Arts

- | | |
|---------------------------------|--------------------------------------|
| _____ Yearbook ALSO CTE | _____ Industrial Art ALSO CTE |
| _____ Concert Band | _____ Intro to Engineering ALSO CTE |
| _____ Digital Design 1 ALSO CTE | _____ Multimedia Production ALSO CTE |
| _____ Digital Design 2 ALSO CTE | |
| _____ Drama | _____ Plant Science ALSO CTE |
| _____ Jazz Band (Zero Period) | _____ Windborne Choir (Zero Period) |

Health and Physical Education

- | | |
|--|--|
| _____ Weights | _____ Health |
| _____ Life Fitness | _____ Drill Team (JROTC) (Zero Period) |
| _____ Advanced Athletic Conditioning (Zero Period) | |

Course Requests

Please be aware that the classes that you request on this form will be used to create the MLHS Master Schedule. Please thoughtfully consider your choice in classes.

Once the master schedule has been built based on student requests, your schedule will be determined and there is no guarantee that another class will be available to you if you change your mind.

If you are electing to take an AP or honors class, please make sure you complete the application and sign the contract. Both the contract and application need to be returned to the counseling center by April 28, 2017.

Future Plans

- I plan on attending Medical Lake High School next year.
- I will not be attending Medical Lake High School next year.
 - I will be moving to a new area.
 - I will be choosing to attend another high school in the area.
 - Other _____

Course Changes

Course changes may be made, with no penalty, ten school days into the new semester if the following criteria are met:

- The change is from need, not preference, and does not create a class overload.
- The teacher and counselor approve the change.

After the first ten school days of a semester, students will not be permitted to make class changes.

Appeals must be made in writing to the building administrator and must include acknowledgement from parent, counselor, and teacher.

Please contact your school counselor if you have any questions or concerns.

Lori Wilbanks
565-3274
lwilbanks@mlsd.org



STUDENT SIGNATURE: _____ **DATE:** _____

PARENT SIGNATURE: _____ **DATE:** _____