

**John Burroughs High School
Registration Course Requests
10th, 11th and 12th graders**

Parents, please check a box:

- Changes made to schedule**
- Schedule ok**

Last Name: _____ First Name: _____

Sex: M F Student ID # _____ Home Phone _____

Course title:

1. English: _____

2. Social Science: _____

3. Math _____

4. Science _____

5. _____

6. _____

Please note: Registration in electives will depend upon students being programmed into academic/graduation required courses first. All courses are year long.

In addition, Teacher Assistant positions MUST be secured before May 31st. T.A. positions will not be added or considered at the start of the school year. NO EXCEPTIONS.

List Alternate Courses in Order of Preference (**you must list three**)

Alternate Course Title

1. _____

2. _____

3. _____

I understand that the courses listed above represent my final decision for next fall.

Student signature _____ Date: _____

I have reviewed and approve the selected course of study listed above. These courses represent our final decisions for next fall.

Parent Signature _____ Date: _____

**If your son or daughter does not return this registration form
back to the counselor, a class schedule will be created based upon what
was originally requested on this form.**