



Centennial High School

Grade 10 Course Selection Form

2013-2014



Surname:	Given Names:	Check if Applicable <input type="checkbox"/> IPP Code _____ <input type="checkbox"/> KAE <input type="checkbox"/> ESL <input type="checkbox"/> Advanced Placement (AP)
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Student CBE ID. No.	Junior High Attended:	Birth Date: Day/Month/Year
Home Phone: Parent / Guardian: Parent / Guardian Work Phone: Cell Phone:	Address: Postal Code:	

Tentative Registration – Grade 10

Subject Name (please circle the appropriate course)					Course Number	Grade 9 Marks	Teacher Recommendation/ Comments
English	10 AP	10-1	10-2	KAE 10-4			
	ESL 2	ESL 3	Sheltered ESL	10			
Math	10 AP	10 Common	10-3	KAE 10-4			
Social	10AP	10-1	10-2	KAE 10-4			
Science	10AP	10	14	KAE 10-4			
Physical Education 10					1445 Boys 1446 Girls 1447 Band*		*What is your Primary Instrument _____

***Please write option name in order of preference.**

**Course
Number**

*Option 1:			
*Option 2:			
*Option 3:			
Alternate Option 4:			
Alternate Option 5:			
Parent's Signature:	Checked By: (Jr. High School Official)		
Student's Signature:	Date:		
Comments:			