

# SOPHOMORE COURSE SELECTION CONTRACT 2019-2020

This document is a CONTRACT. Students may not make changes in these course selections, unless such changes are necessitated by the circumstances detailed in the 2019-2020 Curriculum Guide in the section entitled "Planning - The Course Selection Process." EHS will make every effort possible to enroll students in the courses they list below, but course requests are **not guaranteed** to be part of the FINAL schedule. Enrollment to ALL courses is also dependent upon departmental approval. For questions or assistance on choosing classes, please refer to the 4 Year Planning Guide and the Curriculum Guide.

**All students are required to register for a Minimum of 7 credits (Max 8 cr)**

Student's Name: (First and Last)		Date:	
Department	Course #	Course Title	Credit
<b>English</b>	3020Y 3068Y	<i>Check the box for ONE of the following:</i> <input type="checkbox"/> English II <input type="checkbox"/> British Literature Honors	1.0
<b>Mathematics</b>	5035Y 5036Y 5024Y 5080Y	<i>Check the box for ONE of the following:</i> <input type="checkbox"/> Geometry <input type="checkbox"/> Geometry - A <input type="checkbox"/> Algebra II - A <input type="checkbox"/> Pre-Calculus Honors	1.0
<b>Physical Education</b>	6030S	<i>Please choose a physical education course in addition to Health Education:</i> <div style="text-align: center;">Health Education</div> 2nd Course: _____	0.5 0.5
<b>Religion</b>	6515S 6521S	<div style="text-align: center;">Hebrew Scriptures</div> <div style="text-align: center;">Christian Scriptures</div>	0.5 0.5
<b>Science</b>	7048Y 7050Y	<i>Check the box for ONE of the following:</i> <input type="checkbox"/> Chemistry <input type="checkbox"/> Chemistry Honors	1.0
<b>Social Studies</b>	7518Y	World History	1.0
<b>Elective</b>			
<b>Elective</b>			
<b>Elective</b>			
<b>Elective</b>			
<b>Alternate</b>			
<b>Alternate</b>			

\*\* Please be aware that the following electives are **required for graduation**:

- 0.5 credit of **Public Speaking**
- 1 credit of any **Arts** course

**Total:** \_\_\_\_\_

Parent Signature: \_\_\_\_\_

This contract must be submitted to

Student Services by:

**Friday, February 15, 2019**

Student Signature: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_