

2009 –10 VIERA HIGH SCHOOL SCHEDULE REQUEST – GRADE 9

	Last Name, First Name	Student #	Parent Signature	Date	Teacher Signature
	Semester 1 Course Title/Level <small>(write in course name)</small>	Semester 1 Course Number	Semester 2 Course Title/Level <small>(if different from Sem 1)</small>	Semester 2 Course Number <small>(if different from Sem 1)</small>	
1	English		English 		
2	Math		Math 		
3	Science		Science 		
4	Social Studies		Social Studies 		
5	Elective Career Research	1700380X	Elective Critical Thinking	1700370X	
6	Elective		Elective		
7	Elective		Elective		

ALTERNATE ELECTIVE COURSES

1	2	3	4
Course #:	Course #	Course #	Course #

Electives are scheduled based on class size, availability, and seniority. If alternates cannot be scheduled, counselors will make best selection(s).

Guidance Counselor Signature

White/Yellow: School

Data Clerk Signature

Pink: Student/Parent

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