



Orange Park High School

11th Grade Course Requests

Name: _____

Student Number: _____

Phone Number: _____

Email: _____

Step 1: Obtain Teacher recommendations for your academic classes. (PLEASE UNDERSTAND THAT COURSE SELECTIONS ARE NOT GUARANTEED AND ARE SUBJECT TO CHANGE BASED ON END OF YEAR PERFORMANCE DATA.)

English	Math	Science	History
<input type="checkbox"/> English 3 <input type="checkbox"/> English 3 (I) <input type="checkbox"/> English 3 Honors* <input type="checkbox"/> Adv. Pl. English Comp* <input type="checkbox"/> DE Eng Comp 1&2*	<input type="checkbox"/> Geometry* (I) <input type="checkbox"/> Geometry* <input type="checkbox"/> Algebra II* <input type="checkbox"/> Algebra II Honors* <input type="checkbox"/> Analysis of Func Hon* (S) <input type="checkbox"/> Trigonometry Hon* (S) <input type="checkbox"/> Pre-calculus Honors* <input type="checkbox"/> Financial Algebra* <input type="checkbox"/> Math for College Read* <input type="checkbox"/> DE College Algebra (S)* <input type="checkbox"/> DE Elem Statistics (S)*	<input type="checkbox"/> Chemistry* <input type="checkbox"/> Chemistry Honors* <input type="checkbox"/> Environmental Science <input type="checkbox"/> Marine Science <input type="checkbox"/> Marine Science (I) <input type="checkbox"/> Physics Honors* <input type="checkbox"/> Anatomy & Physiology* <input type="checkbox"/> Anat & Phys Hon* <input type="checkbox"/> Integrated Science Honors* <input type="checkbox"/> AP Biology* <input type="checkbox"/> AP Chemistry* <input type="checkbox"/> AP Environmental Sci*	<input type="checkbox"/> United States History (I) <input type="checkbox"/> United States History <input type="checkbox"/> United History Honors* <input type="checkbox"/> AP United States History*
_____	_____	_____	_____
English Teacher Signature	Math Teacher Signature	Science Teacher Signature	History Teacher Signature

Step 2: Rank order your top four elective choices with 1 being your favorite choice and 4 being your least favorite. REMINDER: If you select a semester course (S), you must select another one to go with it. Circle level when appropriate.

<p>FOREIGN LANGUAGE (Y)</p> <input type="checkbox"/> Spanish 1 / *2 / *3 <input type="checkbox"/> Adv. Pl. Spanish* <p>FINE ARTS (Y)</p> <input type="checkbox"/> Art 2D 1 / 2 / 3 <input type="checkbox"/> Ceramics 1 / 3 <input type="checkbox"/> Adv. Pl Art 2D-Keene* <input type="checkbox"/> Adv. Pl Art 2D-Miller* <input type="checkbox"/> Adv. Pl Art 3D-Miller* <input type="checkbox"/> Theater 1 / 2 / 3 <input type="checkbox"/> Piano 1 / 2 / 3 <input type="checkbox"/> Guitar 1 / 2 <input type="checkbox"/> Visual Tech† 1 / 2 / 3 <input type="checkbox"/> Journalism† 1 / 2 / 3 <input type="checkbox"/> Chorus 1 / 2 / 3 <input type="checkbox"/> Band Wind 1 / 2 / 3 <input type="checkbox"/> Band Percus 1 / 2 / 3 <input type="checkbox"/> AP Music Theory* <input type="checkbox"/> Music Tech/Sound Eng	<p>CAREER/TECH ED(Y)</p> <input type="checkbox"/> Digital Info Tech <input type="checkbox"/> Accounting* 1 / 2 / 3 <input type="checkbox"/> Digital Design* 1 / 2 / 3 <input type="checkbox"/> Naval Science 1 / 2 / 3 / 4 <input type="checkbox"/> Culinary Level 1 / 2 / 3 / 4 <input type="checkbox"/> Automotive 1 / 2 / 3 / 4 <input type="checkbox"/> Early Childhood 1 / 2 / 3 / 4 <input type="checkbox"/> Carpentry 1 / 2 / 3 / 4 <input type="checkbox"/> Welding 1 / 2 / 3 / 4	<p>GLOBAL ELECTIVES</p> <input type="checkbox"/> Creative Writing (S) <input type="checkbox"/> Adv. Pl Psychology* (Y) <input type="checkbox"/> Speech 1 (Y) <input type="checkbox"/> Speech 2 (Y) * <input type="checkbox"/> Forensics 1 (Y) <input type="checkbox"/> Forensics 2 (Y) * <input type="checkbox"/> Law Studies (S) <input type="checkbox"/> Psychology (S) <input type="checkbox"/> Holocaust (S) <input type="checkbox"/> CVA Online Class (S or Y) <p>PHYSICAL EDUCATION</p> <input type="checkbox"/> Personal Fitness (S) <input type="checkbox"/> Team Sports (S) <input type="checkbox"/> Athletic Weight Train (S)	<p>ACADEMIES (Y)</p> <p><i>Engineering:</i></p> <input type="checkbox"/> Principles of Engineering* <input type="checkbox"/> Digital Electronics* OR <input type="checkbox"/> Civil Engineering* <p><i>Health:</i></p> <input type="checkbox"/> Health Science Foundations* <p><i>Business:</i></p> <input type="checkbox"/> Accounting* 1 / 2 / 3 <input type="checkbox"/> Digital Design* 1 / 2 / 3 <input type="checkbox"/> Customer Assist/Teller* 1 / 2 <p>OFFICE USE ONLY:</p> <input type="checkbox"/> Intensive Reading <input type="checkbox"/> Soc/Pers Skills (per IEP) <input type="checkbox"/> Lrng Strategies (per IEP)
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> KEY: * = Check catalog for prerequisites; S = Semester; Y = Year; I = Inclusion ; †= app required </div>			

Student Signature: _____

Parent Signature: _____