

NAME: _____

ID#: _____

E-MAIL: _____

HOME TELEPHONE: _____

E-MAIL (PARENTS): _____

CELL TELEPHONE: _____

CHOOSE ONE COURSE IN EACH SECTION

English			Electives		
I04		AP English Lit & Comp. (\$)	A02		Band II
I05		AP English Lit & Comp. Gifted	A18		Orchestra II
			A32		Chorus II
			A67		Drama II (IB)
Mathematics			A77		Art 2 Pre-IB (\$)
I12		Algebra II Honors	K10		TV Production II
I13		Algebra II Gifted	K18		Journalism II (NP)
I14		IB Trigonometry (T1)	K26		Journalism II (YB)
I16		IB Analytical Geometry (T2)			
Science					
I26		Pre-IB Chemistry I (\$)	Foreign Language		
I28		Physics I Honors	W04		French II
I29		Physics I Gifted	W06		French III Honors
			W20		Spanish II
Social Studies			W22		Spanish III Honors
I40		AP Human Geography	W28		Spanish Speakers II
			W30		Spanish Speakers III Honors
Research			W34		AP Spanish Language
I50		Inquiry Skills Pre-IB	W36		AP Spanish Literature
			Physical Education		
			N14		Beg. Aerobics
			N16		Beg. Weight Training

****A \$10 Academy Fee will be collected through the IB Coordinator every year.**

****A dollar sign (\$) indicates course annual fee.**

I understand changes made to my schedule will only be made if necessary due to an academic failure, FCAT remediation, and/or availability of classes based on the final development of the school's master schedule.

Date

Student Signature

Counselor's Signature

Parent's Signature