

SOPHOMORE COURSE REQUESTS (Class of 2023)

NAME: _____ CURRENT GRADE LEVEL: _____

**Place an X in the box for your class choice. For elective courses, fill in the course number and name.
All students must take 7 courses each semester.**

	X	COURSE NAME	
<i>English</i>	<input type="checkbox"/>	ENGLISH 10	
	<input type="checkbox"/>	ENGLISH 10 HONORS	
<i>Math</i>	<input type="checkbox"/>	GEOMETRY	
	<input type="checkbox"/>	ALGEBRA II	
	<input type="checkbox"/>	ALGEBRA II HONORS	
	<input type="checkbox"/>	STATISTICS AP	
<i>Science</i>	<input type="checkbox"/>	BIOLOGY (L)	
	<input type="checkbox"/>	INTEGRATED CHEMISTRY/PHYSICS (L)	
	<input type="checkbox"/>	CHEMISTRY I (L)	
	<input type="checkbox"/>	CHEMISTRY I HONORS (L)	
	<input type="checkbox"/>	PRINCIPLES OF BIOMEDICAL SCIENCES - PLTW	
<i>Social Studies (NOT required IF completed in 9th grade)</i>	<input type="checkbox"/>	WORLD HISTORY AP	
	<input type="checkbox"/>	GEOGRAPHY & HISTORY OF THE WORLD	
<i>Elective: World Languages The Core 40 with Academic Honors diploma requires three years in one language or two years in two languages.</i>	<input type="checkbox"/>	SPANISH I	SPA
	<input type="checkbox"/>	SPANISH II	
	<input type="checkbox"/>	SPANISH III	
	<input type="checkbox"/>	SPANISH III HONORS	
	<input type="checkbox"/>	LANGUAGE FOR HERITAGE SPEAKERS (SPANISH)	
	<input type="checkbox"/>	FRENCH I	
	<input type="checkbox"/>	FRENCH II	
	<input type="checkbox"/>	FRENCH III	
	<input type="checkbox"/>	FRENCH III HONORS	
	<input type="checkbox"/>	GERMAN I	
	<input type="checkbox"/>	GERMAN II	
	<input type="checkbox"/>	GERMAN III	
	<input type="checkbox"/>	GERMAN III HONORS	
	<input type="checkbox"/>	Semester 1 Electives	
		Semester 2 Electives	
<i>Elective</i>	<input type="checkbox"/>		
<i>Elective</i>	<input type="checkbox"/>		
<i>Elective</i>	<input type="checkbox"/>		
<i>Elective</i>	<input type="checkbox"/>		

You are NOT registered for summer school until you submit in a summer school application to the NHS Main Office.

First Summer School Session:		Second Summer School Session:	
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**These are the classes I choose, and I understand that my schedule cannot be changed after
May 1, 2020.**

Signature: _____

Date: _____