

2017-2018 COURSE REQUEST WORKSHEET - RENO HIGH SCHOOL

Student's Last Name	First Name	M.I.	Grade

You should use this worksheet to plan and select your courses with care. Remember you may ask for a change in your course selection only for the following reasons:

- (1) Failure of a required PREREQUISITE course or graduation requirement during the school year.
- (2) Passing (or failing) a course in summer school, when you have registered for that course during this process; and
- (3) The school's master schedule creates a conflict, which is not your fault. Efforts will be made to honor such requests, based upon the ALTERNATIVE indicated for that specific request on this form.

YOU MUST PROVIDE AN ALTERNATE COURSE TITLE AND NUMBER FOR EVERY SCIENCE AND ELECTIVE COURSE WHICH YOU HAVE INDICATED BELOW.

As you use this worksheet, remember that you are selecting courses **ONLY**. You are **NOT** selecting class periods. You are **NOT** selecting teachers. Please be sure to verify that the course numbers are shown accurately below. Follow the format of the example, which has been provided.

Each student must select courses, which fill SEVEN (7) periods for both semesters. Seniors must select at least FIVE (5) courses for both semesters.

Course #'s for fall & spring		Full title of course requested for school year; each student must select courses which fill six periods for both semesters	Teacher signature or initials, <u>if required</u>	ALTERNATES: Course #'s for alternate selections		Full title of alternate course acceptable; listing an alternate selection is <u>required</u> for ALL elective; an alternate is required for all science and elective selections
fall	spring			fall	spring	
<i>6111</i>	<i>6112</i>	<i>Beginning Art 1-2</i>		<i>6501</i>	<i>6502</i>	<i>Intro to Theater</i>

NOTE: IT IS THE STUDENT'S RESPONSIBILITY TO FAMILIARIZE HIMSELF/HERSELF WITH THE COURSE DESCRIPTION BOOKLET (rhshuskies.com > Academics > Course Catalog) – WITH HIS/HER PARENT AND COUNSELOR – TO SELECT THEIR 2016-2017 COURSE REQUESTS ON THIS FORM. WE BELIEVE THAT THE COURSES CHECKED ABOVE ARE THE APPROPRIATE CHOICES WITH REGARD TO MEETING MY POST HIGH SCHOOL PLAN.

Date

Parent's signature

Student's signature

Summer email address _____

Summer Contact # _____