



STUDENTS ENTERING GRADE 10

STUDENT #: _____ FIRST NAME: _____ LAST NAME: _____

IMPORTANT INFORMATION:

- THIS FORM MUST BE RETURNED TO SCHOOL OFFICE NOT LATER THAN MARCH 11, 2016 AND MUST BE SIGNED BY A PARENT/GUARDIAN.
- All Grade 10 students must be enrolled in **eight (8) Parkland courses** that run inside the regular timetable.
- **Graduation Transitions:** Healthy Living Plan will be completed in Planning 10.

REQUIRED COURSES:	
Choose at least one from each section below (Please ✓ the box provided for your selection)	
<input type="checkbox"/> English 10 (MEN-10)	OR <input type="checkbox"/> English 10 Foundations (MEN-10F)
<input type="checkbox"/> Math 10: Apprentice/Workplace (MAWM-10)	OR <input type="checkbox"/> Math 10: Foundations & Pre-Calculus (MFMP-10)
<input type="checkbox"/> Science 10 (MSC-10)	OR <input type="checkbox"/> Marine Science 10: Includes PE 10 (MSC-10MAR) <small>(See course booklet for more information)</small>
<input type="checkbox"/> PE 10 Boys/Girls – all Grade 10s will have this course automatically assigned (MPE-10B/10G)	
<input type="checkbox"/> Planning 10 - can be taken in Grade 10, 11 or 12 (MPLAN10)	
<input type="checkbox"/> Social Studies 10 - All Grade 10s will have this course automatically assigned (MSS-10)	

Parkland Academies		
<input type="checkbox"/> Hockey Academy <small>(Includes PE 10)</small>	<input type="checkbox"/> Judo Academy <small>(Includes PE 10)</small>	<input type="checkbox"/> Sailing Academy <small>(Outside of Timetable)</small> <input type="checkbox"/> Spring <input type="checkbox"/> Fall

Due to limited resources and potential scheduling conflicts, all courses may not be available. In the event that preferred course(s) cannot be scheduled, alternate choices will be substituted.

ELECTIVES SELECTION (in order of preference – include alternatives)			
Electives listed on reverse. Please consult course selection book online.			
Course Title & Course Code		Course Title & Course Code	
1		4	
2		5	
3		6	

Optional Elective Courses Outside Regular Timetable: (Please ✓ the box provided for your selection)

- | | | |
|--|--|--|
| <input type="checkbox"/> Concert Band 10 (MMCB-10) | <input type="checkbox"/> Graphic Comm 10 (YCCT-0B) | <input type="checkbox"/> Intramural Ath 10 (lunch) (YLRA-0I) |
| <input type="checkbox"/> Jazz Band 10 (MMJB-10) | <input type="checkbox"/> Journalism 10 (YLE-0A) | <input type="checkbox"/> Leadership 10 (lunch) (YCPA-0A) |
| <input type="checkbox"/> Media Arts 10 (MVAM-10) | <input type="checkbox"/> Vocal Music 10 (MMCC-10VOC) | <input type="checkbox"/> Yoga 10 Before School (YHRA-0C-Y) |

SIGNATURES

Student: _____ Parent/Guardian: _____

Check here if you are interested in being a buddy for a new international student Date: _____