

# FINAL REGISTRATION FORM

NAME \_\_\_\_\_ STUDENT I.D # \_\_\_\_\_ CURRENT GRADE \_\_\_\_\_

ADVISOR \_\_\_\_\_ GUIDANCE COUNSELOR \_\_\_\_\_

Please retain this planning form for your record of courses selected. You should register for seven courses per semester and include alternatives when required. (See back for courses requiring alternatives.)

## FIRST SEMESTER

| <u>Course No.</u> | <u>Course Name</u> | <u>If applicable,<br/>Alternate Course No.</u> | <u>Course Name</u> |
|-------------------|--------------------|--|--------------------|
| 1. _____          | _____              | _____  | _____              |
| 2. _____          | _____              | _____  | _____              |
| 3. _____          | _____              | _____  | _____              |
| 4. _____          | _____              | _____  | _____              |
| 5. _____          | _____              | _____  | _____              |
| 6. _____          | _____              | _____  | _____              |
| 7. _____          | _____              | _____  | _____              |

## SECOND SEMESTER

| <u>Course No.</u> | <u>Course Name</u> | <u>If applicable,<br/>Alternate Course No.</u> | <u>Course Name</u> |
|-------------------|--------------------|--|--------------------|
| 1. _____          | _____              | _____  | _____              |
| 2. _____          | _____              | _____  | _____              |
| 3. _____          | _____              | _____  | _____              |
| 4. _____          | _____              | _____  | _____              |
| 5. _____          | _____              | _____  | _____              |
| 6. _____          | _____              | _____  | _____              |
| 7. _____          | _____              | _____  | _____              |

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Counselor Signature