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| --- | --- | --- | --- | --- |
|  Student: Math Teacher:Homeroom Teacher: |  |  | Daniel Hand High School | Course Request Form - Grade 9 |
|  |  | 1. Every student must select courses to equal a minimum of 6.50 credits yearly. |
|  |  | 2. Students must carry a minimum of four courses each trimester.  |
|  |  | 3. Consult the Program of Studies regarding pre-requisite courses, grades, approvals, etc. |
|  |  | 4. Contact your counselor at Polson if you need assistance in planning your program |
|  |  | 5. **COURSE REQUEST FORM** will be submitted to your DHHS counselor during scheduling |
|  |  | 6. **Parent/Guardian signature is required on the COURSE REQUEST FORM** |
|  |
| Student Selection |  |
| Department | Course # | Course Title | Teacher Signature(if approved) | Course # | Recommended Course(if student’s choice is not approved) | Teacher’s Initials |
| English | 012 | Literature and Writing |  |  |  |  |
| Social Studies | 182 | Global Studies |  |  |  |  |
| Math |  |  |  |  |  |  |
| Science |  |  |  |  |  |  |
| Science (if needed) |  |  |  |  |  |  |
| World Language |  |  |  |  |  |  |
| Physical Education | 910 | P.E. / Health 9 |  |  |  |  |
| Personal Finance | 496 | *Must take junior or senior year* |  |  |  |  |
| Elective |  |  |  |  |  |  |
| Elective |  |  |  |  |  |  |
| Elective |  |  |  |  |  |  |
| Alternate Elective |  |  |  |  |  |  |
| Alternate Elective |  |  |  |  |  |  |

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Parent/Guardian Signature

\*I understand it is my responsibility to submit the Override Request Application(s) by 2:00 p.m. on Friday February 4, 2022.

Override Request Applications are available in the School Counseling Office

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Student Name