

Student Name: _____ ID# _____

Return Course Card to your teacher _____ by _____



WELCOME TO WESTERN HIGH SCHOOL

CLASS OF 2023

IMPORTANT DATES FOR INCOMING MIDDLE SCHOOL STUDENTS:

2/15/19 – All course selection cards are due to Indian Ridge Middle School assigned teachers

2/15/19 – All course selection cards are due to Tequesta Trace Middle School assigned teachers

2/20/19 and 2/22/19– Registration/Scheduling takes place at Indian Ridge Middle School (WHS Guidance Department will meet one on one with every incoming student)

3/05/19 – Registration/Scheduling takes place at Tequesta Trace Middle School (WHS Guidance Department will meet one on one with every incoming student)

VERY IMPORTANT: SHOWCASE NIGHT AT WESTERN HIGH SCHOOL

MARK YOUR CALENDARS!
WESTERN HIGH SCHOOL SHOWCASE
ACADEMIC ELECTIVES/ATHLETICS/CLUBS
TUESDAY,
FEBRUARY 12TH, 2019 AT
6:00 P.M.
Welcoming incoming freshmen to WHS!

Counselors Only Achvmt Levels:
FSA RDG _____
Math _____
Science _____
ESE _____ ELL _____
Other _____

Student Name: _____ ID# _____

Student Cell Phone # _____ Parent Cell Phone # _____

Western High School Grade 9 Course Selections 2019-2020

Directions:

1. Complete in PENCIL by marking an "X" next to the course title/number of your 8 choices.
2. Must have: English, Math, Science, Social Studies, Study Hall, HOPE, ELECTIVE, & ELECTIVE
3. Must select 3 Alternate Courses

STUDENTS/PARENTS: The courses you have selected will be used for scheduling next year's classes. Give each choice careful consideration as schedule changes will not be permitted due to the Class Size Reduction Legislation and Mandate.

***EOC Courses – Placement will be based on released test results. Adjustments will be made to course selection at that time.**

****All students currently in a reading class will be scheduled into a reading class until ELA results are released.**

*****Needs Teacher Approval and/or application completed.**

PARENTS: I have discussed these courses with my child and approve of the selections. I understand that the courses selected are for a full year.

Parent Signature _____ Date ___/___/___

Student Signature _____ Date ___/___/___

**BROWARD COUNTY PUBLIC SCHOOLS -
Consent to Post Student Information During the First Week of School and during Super Testing Days**

Types of Information

Identifiable student information from education records is confidential and protected by the Family Educational Rights and Privacy Act (FERPA). This includes: student name, teacher name, room number, grade level and class (subject).

Purpose

To inform students and parents of teacher and room number assignments, and to help facilitate everyone finding the proper place to be during the busy first week of school, our school would like to post this information on the school wall during the first week of the school year.

Recipient of information

Students, parents, school-based staff, and anyone visiting the school will be able to see the posted information.

Consent

I hereby authorize Western High School staff to post the above-mentioned types of information about my student, for the purpose listed above.

Signed on this ___ day of _____, 2019.

Print name of Parent/Guardian/Student 18 or Over

Signature of Parent/Guardian/Student 18 or Over

COURSE SELECTIONS:

SUBJECTS	Course Number	Teacher Initials
ENGLISH (EN)		
English I	10013100	
English I Honors	10013200	
CAMBRIDGE: AICE General Paper (Serves as required English credit)	10093600	
MATHEMATICS (MA)		
Liberal Arts I	12073000	
Algebra I*	12003100	
Algebra 1 Honors*	12003200	
Geometry*	12063100	
Geometry Honors*	12063200	
Algebra II	12003300	
Algebra II Honors	12003401	
SCIENCE (SC)		
Environmental Science	20013400	
Biology Honors*	20003201	
Chemistry Honors	20033500	
AP Biology (Pre-requisites are: Algebra 1 EOC Level 5 and Geometry EOC Level 5)	20003400	
SOCIAL STUDIES (SS)		
Financial Literacy/ Critical Thinking Online (FSA1&2)	21023720	
Financial Literacy Honors/ Critical Thinking Online (FSA 3&4)	21023740	
AP Human Geography (FSA 5)	21034000	
INNOVATIVE PROGRAMS		
STEM: Solar Car I Hon***	2002340S	
STEM: Rocketry I Hon***	2002340K	
STEM: Robotics I Hon***	2002340R	
STEM: Bio Technology Hon***	2002340B	
WORLD LANGUAGES (EL)		
American Sign Language I	07173000	
Chinese I (Must be paired with 2 nd World Language class in Alternates)	07113300	
French I	07013200	
Spanish I	07083400	
Spanish II	07083500	
Spanish III Honors	07083600	
Spanish Speakers I	07093000	
Spanish Speakers II	07093100	
Spanish Speakers III Honors	07093200	
ACADEMIC ELECTIVES (EL)		
Debate I Honors	1007330D	
Journalism	1006300A	
CAMBRIDGE: (Elective Credit) AICE Thinking Skills	17003720	
J.R.O.T.C. (EL)		
ROTC I	18013000	
PHYSICAL EDUCATION (EL)		
HOPE (Health & PE for 9 th grade)	30260100	
PERFORMING ARTS/FINE ARTS (EL)		
<u>Art</u>		
2D Studio Art 1	01013000	
<u>Drama</u>		
Introduction to Drama	04003000	
Musical Theatre 1	04007000	
<u>Band</u>		
Beginning Band 1	13024600	
Guitar/Drums	13013200	
Band I (Double Block) ***	13023000	
	13023600	
Music Technology & Prod.	13043000	
Color Guard*	13053000	
<u>Chorus</u>		
Beginning Chorus 1	13033000	

OTHER ELECTIVE CREDITS		
Reading**	1000410B	
Developmental Lang (ELL)***	10023811	
ESE: Learning Strategies***	79630800	
Personalization Period		
Personalization (Required)	22003000	XXXXXXXX
CAREER & TECHNICAL (ELECTIVES)		
<u>Digital Design</u>		
Digital Information Technology	82073100	
<u>Family & Consumer Sciences</u>		
Early Childhood Ed. I	84051100	
<u>Horticulture Science and Services</u>		
Agri-science Foundations 1 Honors	81068100	
<u>Medical Skills and Services</u>		
Medical Skills & Services	84003200	
<u>Pathways to Engineering</u>		
Principles of Engineering Honors	86005200	
<u>Computer Programming</u>		
Advanced Information Tech Honors	90076100	
<u>Marketing</u>		
Business Tech (Students on DECA track)	8207310B	
<u>Culinary Arts</u>		
Culinary Arts 1	88005100	

List 3 alternate elective choices below and choose them wisely. Should scheduling conflicts or cancellations occur, these alternates would be substituted in your schedule.

ALTERNATE COURSES: PLEASE PRINT COURSE NAME & NUMBER:

	Course Name	Course Number
Alternate 1		
Alternate 2		
Alternate 3		

BROWARD COUNTY PUBLIC SCHOOLS, FLORIDA
Course Recommendation Override Form
Parent/Guardian Preference Form for Placement in Non-recommended Courses

Student Name (Last, First)	Grade	Student Number
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Course placements are based on individual student achievement, test scores, and other academic data. These placements are based on research; which support specific course selections to provide students with the most rigorous academic program. Parents/Guardians who request to change these placement decisions must meet with a school counselor/designee to be aware that:

- Students choosing a more rigorous course may need additional support (e.g., tutoring, extra study time, exam reviews, study groups, parental support, etc.).
- All high school courses, including those taken in middle school and/or "forgiven," will remain on the permanent transcript and may be used by colleges, scholarships, or other institutions based upon their respective policies.
- Choosing less rigorous courses may impact future high school course choices.
- Choosing less rigorous courses may negatively impact a student's post-secondary choices (i.e. may not be as competitive for college admission).
- Choosing less rigorous courses may limit the student's chance of receiving a Bright Futures Scholarship and other college funding support.

Counselor/Designee Signature	Date
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Please complete the information below in print:

Recommended Course #1 Parent/Guardian Preferred Course	/
Recommended Course #2 Parent/Guardian Preferred Course	/
Recommended Course #3 Parent/Guardian Preferred Course	/

Reason(s): _____

I understand the information described at the top of this form and have participated in a conference with the school counselor/designee at my child's school regarding my child's recommended course placement. I understand why the course recommendation was made; however, I still wish to have my child placed in the preferred course(s) listed on this form and am willing to provide the academic and emotional support my child may need while participating in this course.

Parent/Guardian Signature	Date
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