

COURSE REQUEST CARD
Use Pencil and Print Carefully

GRADE NEXT YEAR
 9 10 11 12

GENDER
 F M

NAME: _____ Date of Birth _____

Address: _____ Home Phone: _____

Father's name _____ Work Phone: _____

Mother's name _____ Work Phone: _____

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FIRST SEMESTER

SECOND SEMESTER

	Course Title	Teacher		Course Title	Teacher
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		

Parent/Guardian signature: _____

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