

## Century Academy Grade 7 Course Request

Student Name \_\_\_\_\_ Student Cell \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Cell \_\_\_\_\_

Student Email \_\_\_\_\_ Parent Email \_\_\_\_\_

Please choose one from each category of the required classes listed below.

English: _____	<ul style="list-style-type: none"><li>• English 7 CP</li><li>• English 7H</li></ul>
Math: _____	<ul style="list-style-type: none"><li>• Math 7CP</li><li>• Math 7A</li><li>• Algebra 1H</li></ul>
Science: _____	<ul style="list-style-type: none"><li>• Life Science 7CP</li></ul>
Social Studies: _____	<ul style="list-style-type: none"><li>• Social Studies 7CP</li><li>• Social Studies 7H</li></ul>
Physical Education: _____	<ul style="list-style-type: none"><li>• PE 7</li></ul>
Elective: _____	<ul style="list-style-type: none"><li>• Elective Wheel TBD</li><li>• Strings, Band, or Chorus at the residential middle school</li></ul>

I have reviewed the above program with my student and I agree with the courses requested.

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Please email the completed form to [rkelterer@conejousd.org](mailto:rkelterer@conejousd.org)