



Sophomore Registration Form

Chico High School

Student Name: _____

Student ID #: _____

Please use the Course Offering Sheet and Course Descriptions to help you select your classes.

Class 1: English - choose 1		
<input type="checkbox"/>	English 10-P	22525
<input type="checkbox"/>	HO English 10-P	22536
Other:		
Title		Course#
Teacher Signature:		

Class 5: Science	
First Choice:	
Title	Course#
Alternate:	
Title	Course#

Class 2: History - choose 1		
<input type="checkbox"/>	World History-P	26804
<input type="checkbox"/>	AP Euro History-P	26805
Other:		
Title		Course#

Class 6: Academic Success	
Academic Success 10	29320

Class 3: Math - choose 1		
<input type="checkbox"/>	IM 1 - P	24541
<input type="checkbox"/>	IM 2 - P	24542
<input type="checkbox"/>	IM 3 - P	24543
Other:		
Title		Course#
Teacher Signature:		

Class 7: Elective	
First Choice:	
Title	Course#
Alternate:	
Title	Course#

Class 4: PE		
<input type="checkbox"/>	PE 10	
<input type="checkbox"/>	Fitness for Life	25519
Other:		
Title		Course#

Class 8: Elective	
First Choice:	
Title	Course#
Alternate:	
Title	Course#

POST HIGH SCHOOL PLAN	
Career Interest: (e.g. Nurse, Teacher, Firefighter . . .)	
Four-Year College/University: (CSU, UC, Private, out of state . . .)	
College Sports: (e.g. football, swimming, soccer . . .)	
Community College: (Butte, Shasta . . .)	
Vocational/Technical School: (ITT, Culinary Arts . . .)	
Enlist in the Military & Armed Forces: (Army, Navy, Air Force, Marines . . .)	

General Information: Counselor Only	
CTE Pathway:	Summer School:
504 Plan:	Credit Recovery:
IEP:	VOA:
NCAA:	ISP:
Counselor Signature:	

Student signature _____

Parent Signature _____

