



2024-2025

Advisor:

# Veterans High School Sophomore Registration Form

**Student Name:** \_\_\_\_\_

**Student ID#:** \_\_\_\_\_

**Core Courses:** Circle the core courses for which you wish to register.

English	Math	Science	Social Studies
10th Literature 23.0620010	Algebra I A/B 27.0990010/20	Physical Science 40.0110010	World History 45.0830010
10 <sup>th</sup> Literature (Resource) 23.8620010	Geometry 27.0991010	Physical Science (Resource) 40.8110010	World History (Resource) 45.8830010
10 <sup>th</sup> Literature (Co-taught) 23.9620010	Geometry (Resource) 27.8991010	Physical Science (Co-taught) 40.9110010	World History (Co-taught) 45.9830010
Honors 10 <sup>th</sup> Literature 23.2620010	Geometry (Co-taught) 27.9991010	Honors Chemistry 40.2510010	Honors World History 45.2830010
	Honors Algebra 2 27.2992010		AP World History 45.2811010
	AP Statistics 27.2740010		
Content Teacher Signature: _____	Content Teacher Signature: _____	Content Teacher Signature: _____	Content Teacher Signature: _____

**Elective Courses:** List the electives for which you wish to register in order of preference.

**\*\* PLEASE PRINT LEGIBLY\*\***

	Course #	Course Name
<b>1st choice</b>		
<b>2nd choice</b>		
<b>3rd choice</b>		
<b>4th choice</b>		
<b>5th choice</b>		

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Advisor Signature \_\_\_\_\_

Date \_\_\_\_\_

Office Use Only

Entered: \_\_\_\_\_

Initials: \_\_\_\_\_

White – School copy

Yellow – Advisor copy

Pink – Parent copy