



10

École Alpha Secondary

COURSE SELECTION 2017-2018

LAST NAME: _____ FIRST NAME: _____

STUDENT # _____

Course Name

1. 1st Choice _____
2nd Choice _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

OPTIONAL: If you wish to take additional courses please indicate below:

9. _____
10. _____

Alternate Course Selections – ENTER ALTERNATES ONLINE

Alternate 1. _____

Alternate 2. _____

The school is staffed and timetabled for September on the basis of the information provided on this form; course changes in September may not always be possible.

Student's Signature: _____

Parent's Signature: _____