BEV FACEY
COMMUNITY HIGH SCHOOL
Student Name: $\qquad$ Cohort: $\qquad$ $-$ Date: $\qquad$
Parent Signature: $\qquad$ Present School:

## Parents/Guardians:

You are encouraged to discuss education plans with your child and to call Bev Facey at 780-467-0044 if there are any questions, or you can contact your child's junior high school counsellor.

| Student Signature:_ | Date: |
| :--- | :--- |
| Parent/Guardian Signature: | Date: |
| (Your signature indicates agreement with your child's choices.) |  |

## Please choose 8 courses to fill your timetable.



## ALTERNATIVE COURSE

Write the name of 2 more course that you are willing to take if your other choices are not available.
1)
2)

Full Year Courses
These courses take place off the timetable; you can choose more than one. These courses DO NOT count towards your eight classes.

|  | Facey Leadership Initiative (FLI) <br> Instrumental Music 10 AP PREP | Instrumental Music 10 <br>  | Technical Theatre 15 |
| :--- | :--- | :--- | :--- |

High Performance Advisory (HPA) *List your activity here: $\qquad$

Grade 11 Courses
List Grade 11 course(s) you may wish to take in Grade 10.
$\square$

* Depending on course availability, students may be limited to taking courses within their grade level only.

