

2011 SUMMER SCHOOL REGISTRATION FORM

@ Shasta High School (530) 245-2636

All classes begin Friday, June 10, 2011

All classes end Friday, July 8, 2011

Student Name _____ ID # _____

Address _____ Year of Graduation _____

City _____ Zip _____ Phone _____

Emergency Contact _____ Phone _____

Parent Signature _____ ** Don't forget to sign page 2

School Counselor's Signature _____

A transcript of student's grades MUST be attached to this registration form.

INSTRUCTIONS: Before you register for the courses that are listed below, you and your counselor must determine whether you are failing classes and will register for make-up classes.

Parent and counselor must sign this form, and a transcript must be attached. Questions regarding courses and credits should be directed to your school counselor.

Please check the box if you plan on using District Transportation

Please indicate if student is RSP _____ SDC _____

MAKE-UP COURSES

Algebra 1B (3 or 6 hours)	5/10	_____
Algebra 1A 1 st semester	5	_____
Algebra 1A 2 nd semester	5	_____
Geometry 1 st semester	5	_____
Geometry 2 nd semester	5	_____
American Government	5	_____
Biology	5	_____
Economics	5	_____
English I	5	_____
English II	5	_____
English III	5	_____
English IV	5	_____

MAKE-UP COURSES (continued)

Intro to Social Science	5	_____
Personal Growth	5	_____
Physical/Earth Science	5	_____
Physical Education	5	_____
U.S. History	5	_____
World History	5	_____

ELECTIVE COURSES

CAHSEE ENGLISH	5	_____
CAHSEE MATH	5	_____

Counseling notes: _____

Enrollment date: _____