



COURSE SELECTION FORM

Date: _____

High School: _____

Last Name: _____

First Name _____

Social Security # _____

OSIS# _____

High School Average _____

Grade: _____

Please select three (3) courses in order of your preference. We will start by trying to register you in your first choice course. If that class is full, we will go to your second choice, and if necessary to your third. Listing three courses will better your chances of getting into a class, but please do not list courses you have no intention of taking, even if that means you will list fewer than three.

COURSE NAME

MEETING TIMES

Example: (Robotics)

(T, TH 4-5:15)

1. _____
2. _____
3. _____

APPLICATION CHECKLIST

- College Now Student Registration Form
- Transcript
- Parental Consent Form
- Course selection Form