

# SEYCOVE SECONDARY SCHOOL - 2023-2024

## GRADE 9 COURSE PROGRAMMING REQUEST FORM

9

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ STUDENT CELL # \_\_\_\_\_  
 STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### OPTION #1: GRADE 9 PROGRAM

✓ selection

1. ENGLISH 9	<input checked="" type="checkbox"/>
2. SOCIAL STUDIES 9	<input checked="" type="checkbox"/>
3. SCIENCE 9	<input checked="" type="checkbox"/>
4. MATH 9	<input checked="" type="checkbox"/>
5. PHYSICAL & HEALTH EDUCATION 9	<input type="checkbox"/>
OR	
SPORT ACADEMY _____	<input type="checkbox"/>

\* Note: Supplemental fees apply to all Academies. Students must complete application and pay through School Cash Online.

### ELECTIVES - RANK IN PRIORITY ORDER 1-7

FRENCH 9	#
ENGINEERING & WOODWORKING 9	#
ART, DIGITAL ART & PHOTOGRAPHY 9	#
DRAMA 9	#
FOODS 9	#
TEXTILES 9	#
CHOIR 9	#

### ELECTIVE COURSES OUTSIDE THE TIMETABLE

CONCERT BAND 9	<input type="checkbox"/>
JAZZ BAND 9	<input type="checkbox"/>
VOCAL JAZZ 9	<input type="checkbox"/>

### OPTION #2: PERFORMANCE LEARNING PROGRAM (PLP)

✓ selection

**\*Note: PLP Requires the completion of a registration project.**

1. HUMANITIES 9- PLP English 9	<input checked="" type="checkbox"/>
2. HUMANITIES 9- PLP Social Studies 9	<input checked="" type="checkbox"/>
3. PLP SCIENCE 9	<input checked="" type="checkbox"/>
4. PLP MAKER (Engineering, Art, Info Tech & Design)	<input checked="" type="checkbox"/>
5. MATH 9	<input checked="" type="checkbox"/>
6. PHYSICAL & HEALTH EDUCATION 9	<input type="checkbox"/>
OR	
*SPORT ACADEMY _____	<input type="checkbox"/>

\*Note: Supplemental fees apply to all academies. Students must complete application and through school cash online.

### ELECTIVES - RANK IN PRIORITY ORDER 1-7

FRENCH 9	#
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DRAMA 9	#
FOODS 9	#
TEXTILES 9	#
CHOIR 9	#

COURSE PROGRAMMING GUIDE CAN BE FOUND AT:  
<https://www.sd44.ca/school/seycove>

Questions? Please contact **Jay Prepchuk** (Gr. 9 Counsellor 2023/24)  
**jprepchuk@sd44.ca** or **604-903-3643**

**Form Due by Thursday  
 Feb 16th, 2023**

Do you have LAC Support?

Yes ☐ No ☐

Would your student like to  
 continue with LAC?

Yes ☐ No ☐

### COUNSELLING NOTES

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PARENT EMAIL \_\_\_\_\_