

Course Registration Form

Grades 9–12

Complete and submit this form along with necessary ERFs before the fall deadline.
Refer to School Calendar for all deadlines.

Student Information

9 10 11 12

Student's Name	Student's ID #	Grade Level (Check One)
Address		Phone
City	State	ZIP
Parent's/Guardian's Name		Email Address

Please carefully check the information for each course taken. A separate Elective Reporting Form (ERF) is required for designated courses below (◆). To avoid late fees, please see school calendar for due dates.

Subject	Course	ERF	Semester					Time of Instruction (per semester)	
			1	2	BJU Press Distance Learning	Parent	Other	2.5 per week (.25 credits)	4-5 per week (.50 credits)
Math	<input type="checkbox"/> Algebra 1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Geometry		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Algebra 2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Consumer Math	◆	<input type="checkbox"/>	<input type="checkbox"/>	Use ERF				
	<input type="checkbox"/> Precalculus	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Science	<input type="checkbox"/> Physical Science w/lab		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Biology w/lab		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Chemistry w/lab	◆	<input type="checkbox"/>	<input type="checkbox"/>	Use ERF				
	<input type="checkbox"/> Physics w/lab	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Social Studies	<input type="checkbox"/> Cultural Geography		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> World History		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> U.S. History		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> American Government		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Economics		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English	<input type="checkbox"/> Writing & Grammar 9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Fundamentals of Lit.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Writing & Grammar 10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Elements of Literature		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Writing & Grammar 11		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> American Literature		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Writing & Grammar 12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> British Literature		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bible	<input type="checkbox"/> Modules	◆	<input type="checkbox"/>	<input type="checkbox"/>	1st Semester 2nd Semester 3rd Semester				
	<input type="checkbox"/> Bible Truths	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Health/ Phys. Ed.	<input type="checkbox"/> Physical Education	◆	<input type="checkbox"/>	<input type="checkbox"/>	Start Date: Start Date: Start Date:				
	<input type="checkbox"/> Health (Level II only)	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Computer Sciences	<input type="checkbox"/> Keyboarding	◆	<input type="checkbox"/>	<input type="checkbox"/>	End Date: End Date: End Date:				
	<input type="checkbox"/> Computer Applications	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Foreign Language 1	<input type="checkbox"/> French I	◆	<input type="checkbox"/>	<input type="checkbox"/>	Total Credits Attempted: Total Credits Attempted: Total Credits Attempted:				
	<input type="checkbox"/> Spanish I	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Latin I	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Other	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Other	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Foreign Language 2	<input type="checkbox"/> French II	◆	<input type="checkbox"/>	<input type="checkbox"/>	Comments				
	<input type="checkbox"/> Spanish II	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Latin II	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Other	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Other	◆	<input type="checkbox"/>	<input type="checkbox"/>					
Electives	<input type="checkbox"/> BJU Press Music	◆	<input type="checkbox"/>	<input type="checkbox"/>	Parent's/Guardian's Signature				
	<input type="checkbox"/> BJU Press Speech	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Family Life Skills	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Other _____	◆	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/> Other _____	◆	<input type="checkbox"/>	<input type="checkbox"/>					

