



# G.W. Graham Secondary School

## GRADE 9 TO GRADE 10 COURSE SELECTION FORM

STUDENT NAME:

LAST

FIRST

STUDENT NUMBER:

Course descriptions are located in the *Course Booklet and Planning Guide*, available on the school website:

<https://gwgs.sd33.bc.ca/course-booklet-planning-guide>

1. STUDENTS WILL AUTOMATICALLY BE SCHEDULED INTO THE FOLLOWING (Mandatory for all Grade 10 Students):

☒

CAREER EDUCATION 10

☒

SCIENCE 10 OR SCIENCE 10 GRAHAM X

2. CHOOSE ONE (1) – ENGLISH SELECTION:

☐  
☐

EFP 10: LIT STUDIES & WRITING

EFP 10: LIT STUDIES & SPOKEN WORD

☐  
☐

EFP 10: LIT STUDIES – GRAHAM X\*

HUMANITIES 10 FINE ARTS - ENGLISH

AP CAPSTONE SEMINAR \*(MUST BE TAKEN WITH AP  
CAPSTONE SEMINAR – 2 BLOCKS)  
AP RESEARCH

3. CHOOSE ONE (1) – SOCIAL STUDIES SELECTION:

☐

SOCIAL STUDIES 10

☐

HUMANITIES 10 - FINE ARTS – SOCIAL STUDIES

☐

SOCIAL STUDIES 10 - GRAHAM X\*

4. CHOOSE ONE (1) – PHYSICAL & HEALTH EDUCATION SELECTION:

☐  
☐  
☐

PHYSICAL & HEALTH EDUCATION 10

PHE BASKETBALL 10

PHE FOOTBALL 10

☐  
☐  
☐

PHE LEADERSHIP 10

PHE RUGBY 10

PHE SOCCER 10

☐  
☐  
☐

PHE VOLLEYBALL 10

PHE - GRAHAM X 10\*

Baseball & Softball Academy Registration QR Code on  
Back Page

5. CHOOSE ONE (1) – MATH SELECTION:

☐  
☐

FOUNDATIONS AND PRE-CALCULUS 10

WORKPLACE MATH 10

☐

FOUNDATIONS & PRE-CALCULUS 10 – DAILY/MATH 10 SUPPORT (TWO BLOCKS)  
(ONE BLOCK, EVERY DAY, ALL YEAR)

6. CHOOSE THREE (3) ELECTIVES:

1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_

7. CHOOSE THREE (3) ALTERNATE ELECTIVES (different than the courses you chose above):

1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_

8. OUTSIDE OF THE TIMETABLE (optional):

☐  
☐  
☐

BROADCAST PRODUCTION 10 – OT

JAZZ BAND 10 - OT

MUSICAL THEATRE 10 – OT

☐  
☐  
☐

OUTDOOR EDUCATION 11 – OT

STRENGTH & CONDITIONING 10 – OT

THEATRE COMPANY 11 – OT

☐

YEARBOOK 10 – OT

### PARENTS/GUARDIANS

Please discuss these course selections with your student and indicate your approval with your signature.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE(S) TO COUNSELLOR(S): (ex. Trades Sampler, Learning Support Blocks, repeat course(s), etc.)

# CLAW

9. CHOOSE TWO (2) CLAW SELECTIONS (IN PRIORITY ORDER):

1: \_\_\_\_\_

2: \_\_\_\_\_

ACADEMIC ELECTIVE (AUTOMATIC ALTERNATE FOR ALL STUDENTS): \_\_\_\_\_

Scan the QR code or click [HERE](#)  
to view the CLAW opportunities  
available to you:



## GW Graham Counselling Team

A - D	Mr. Price	<a href="mailto:thomas_price@sd33.bc.ca">thomas_price@sd33.bc.ca</a>
E - K	Ms. Olafson	<a href="mailto:kiana_olafson@sd33.bc.ca">kiana_olafson@sd33.bc.ca</a>
L - R	Ms. Hancock	<a href="mailto:kim_hancock@sd33.bc.ca">kim_hancock@sd33.bc.ca</a>
S - Z	Ms. Daly	<a href="mailto:alex_daly@sd33.bc.ca">alex_daly@sd33.bc.ca</a>