



## High School Course of Study

<b><i>Student:</i></b>	<b><i>Age:</i></b>	<b><i>Grade:</i></b>	<b><i>School Year:</i></b>
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<b>Subject:</b>	<b>Book Title and Publisher</b>	<b>Level</b>	<b>Credits</b>
<i>Religion</i>			
<i>Language Arts</i>			
<i>Foreign Language</i>			
<i>Math</i>			
<i>Science</i>			
<i>Social Studies/History/Geography</i>			
<i>Fine Arts</i>			
<i>Physical Education/Health</i>			
<i>Electives</i>			

PLEASE COMPLETE ONE SHEET FOR EACH STUDENT