

Student Name: \_\_\_\_\_

This planning sheet must be turned into your counselor. **All courses should be entered into Schoolinks.**

### 2024 - 2025 Course Selection Planning Sheet

Online Course Catalog Link: <https://app.schoolinks.com/course-catalog/katy-isd>

Endorsement- Choose one. If you do not know which one to pick, choose multidisciplinary.

- STEM
- Business and Industry
- Public Service
- Arts and Humanities
- Multidisciplinary

Indicate your course requests below. Choose enough courses to fill seven class periods. If you pick a semester class choose another semester class to complete the year.

Sample:

| Course Name                        | Course Code | Full Year or Sem/Sem |
|------------------------------------|-------------|----------------------|
| English 1                          | 0101        | Full Year            |
| Professional Communications/Health | 1520/0505   | Sem/Sem              |
| Course Name                        | Course Code | Full Year or Sem/Sem |
| 1.                                 |             |                      |
| 2.                                 |             |                      |
| 3.                                 |             |                      |
| 4.                                 |             |                      |
| 5.                                 |             |                      |
| 6.                                 |             |                      |
| 7.                                 |             |                      |

### **Alternate Course Selections**

Course availability is determined by students' course selections. List three alternate electives that could replace a class if it is full or is not offered. This information will be entered into Schoolinks.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please note that during the 2024-2025 school year some classes may be offered virtually if the class is not available for face to face instruction. Please indicate below if you would like to opt-in or opt-out of the virtual option for your student.

- Yes, my child can participate in virtual instruction.
- No, do not place my child in a class with virtual instruction. Please place my child in one of their alternate classes.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_