CANADIAN ACADEMY
2019-2020
GRADE 9 COURSE REQUEST FORM

Name: _____

Subject Group	Subject name
English	English 9
Individuals & Society	Social Studies 9
Sciences	Science 9
Design	Design 9
Physical Education	Physical and Health Education 9
Mathematics *(to be accessed by CA teacher)*	Integrated Mathematics 9 standard Integrated Mathematics 9 extended
Modern Languages *(level to be accessed by CA teacher)*	Choose Language: ❑ Japanese ❑ Spanish ❑ never studied before: beginner ❑ studied before for …….. years/months
Arts options	Art Theatre Concert Band Orchestra Music Appreciation & Performance Your 1st choice: …… Alternate choice: ……
High School Skills *This will be in place of arts class.*	by CA teacher recommendation

❑ I am interested in taking the Japanese Tea Ceremony course.

I understand that all the choices above commit me to the course for the full year.

_____ _____

Student signature Date *Parent signature* Date

Your signature indicates agreement with the choices above.

Complete and return this signed form to Secondary School Counselling Office:
Email: mineyot@canacad.ac.jp
Fax: +81-78-857-3250 international / 078-857-3250 domestic