

Tentative High School Program Plan

NAME: _____ CAREER CHOICE: _____ EXPECTED GRADUATION: _____ CREDITS TO DATE: _____	Post High School Plans <input type="checkbox"/> 2 yr <input type="checkbox"/> 4 yr <input type="checkbox"/> Trade <input type="checkbox"/> Work	Diploma <input type="checkbox"/> Advanced Regents with Honors <input type="checkbox"/> Advanced Regents <input type="checkbox"/> Regents with Honors <input type="checkbox"/> Regents <input type="checkbox"/> Local/IEP	Proposed IB <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate
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Academic Area	9th Grade	10 Grade	11th Grade	12th Grade
English				
Social Studies				
Science				
Math				
Foreign Language				
Physical Education				
Other				
Regents				

I understand by signing this document that I am aware and in agreement with the above tentative program plan.

_____	_____	_____
Primary Counselor	Student	Parent
_____	_____	
IB Counselor	IBO Coordinator	

Community Organizations and Service:

<u>Grade</u>	<u>Activity</u>	<u>Where</u>

Academic Awards, Honors and Special Interests:

<u>Grade</u>	<u>Program or Organization Granting the Award</u>

Work Experience:

<u>Grade</u>	<u>Hours</u>	<u>Job or Type of Work</u>

In addition, please comment on any interests, talents, hobbies and/or experiences that may not have been mentioned elsewhere on this sheet.
