

# St. Andrew's Regional High School

## 2026-2027 Grade 10 Course Selection

# 10

### Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Please refer to the course selection handbook for course descriptions, prerequisites, and course fees.

**Required Courses:** Choose courses as noted from each section to meet the BC Graduation Requirements. Additional selections can be added as electives. Review selections carefully as changes will be restricted. **Students in Gr. 10 MUST take 8 courses inside the timetable.**

<b>Religion:</b>	<input checked="" type="checkbox"/> Religion 10 (4 credits)
<b>PHE:</b>	<input checked="" type="checkbox"/> Physical and Health Education (PHE) 10 (4)
<b>Social Studies:</b>	<input checked="" type="checkbox"/> Social Studies 10 (4)
<b>Science:</b>	<input checked="" type="checkbox"/> Science 10 (4)
<b>Career Education:</b>	<input checked="" type="checkbox"/> Career Life Education (CLE) (4)
<b>Language Arts:</b> Choose 1	<input type="checkbox"/> Composition 10 (2) & New Media 10 (2) - total 4 credits <input type="checkbox"/> Literary Studies 10 (2) & Spoken Language 10 (2) - total 4 credits
<b>Mathematics:</b> Choose 1 only	<input type="checkbox"/> Foundations of Mathematics and Pre-Calculus 10 (4) <input type="checkbox"/> Workplace Mathematics 10 (4)
<b>Inside the Timetable Electives:</b> Label your <b>top 2</b> elective choices - #1 being your top choice.	<input type="checkbox"/> Core French 10 (4) <input type="checkbox"/> Food Studies 11 (4) <input type="checkbox"/> Spanish 10 (4) <input type="checkbox"/> Graphic Production / Yearbook 11(4) <input type="checkbox"/> Art Studio 10 (4) <input type="checkbox"/> Computer Studies 10 (4)
<b>Inclusive Ed:</b>	<input type="checkbox"/> Support Block 10 (0) *You are only eligible if you are currently enrolled in Support Block 9.
<b>Outside the Timetable Electives:</b> Optional	<input type="checkbox"/> Concert Choir 10 (4) <input type="checkbox"/> Theatre Company 10 (4) <input type="checkbox"/> Jazz Band 10 (4) <input type="checkbox"/> Theatre Production 10 (4) <input type="checkbox"/> Concert Band 10 (4)
<b>Optional:</b>	<input type="checkbox"/> <b>Check box if you would like to speak with an Academic Advisor. Add notes:</b> _____ _____

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