



HOPE Academy
Partner School of Collegiate Academy of Colorado

Priority #: _____ Date Received: _____ Time Received: _____

Course Selection Form
2020-2021 School Year

Please select **seven (7)** class choices (within the respective grade level) that you would like for your child to take. Five class sections (a two day class counts for two sections) are required, but alternate choices are good to have for scheduling purposes. Classes will be filled on a first-come, first-served basis in order of receipt of enrollment forms and course selection sheets. See class selections below:

Student Name _____

Grade Level for 2020-2021 School Year _____

Kindergarten: All-inclusive classroom _____

1st Grade: All-inclusive classroom _____

2nd-6th Grade:

7th-12th Grade:

Choice #1: _____

Choice #1: _____

Choice #2: _____

Choice #2: _____

Choice #3: _____

Choice #3: _____

Choice #4: _____

Choice #4: _____

Choice #5: _____

Choice #5: _____

Choice #6: _____

Choice #6: _____

Choice #7: _____

Choice #7: _____

Additional Information – Please provide any other information you would like us to know regarding scheduling your child’s classes:

Thank you!