

HILLSBORO HIGH SCHOOL
Registration for 2020-21 – Senior Year

NAME _____ **Date of Birth** _____
(Last Name , First Name)

Students will have three school days in which to add/drop classes after the beginning of each semester

Career Choice _____ College(s) _____

Fall

Spring

0. _____

0. _____

1. **Child Care** _____

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2. **Child Care** _____

2. **Child Care** _____

3. **American Govt** _____

3. **Con Ed** _____

4. **English** _____

4. **English** _____

5. **Elective** _____

5. **Elective** _____

6. **Elective** _____

6. **Elective** _____

7. **PE** _____

7. **PE** _____

PLEASE CHOOSE ALTERNATE CLASSES FOR YOUR ELECTIVES

1 _____

2 _____

3 _____

4 _____