

## Course Request Form

### PEP Program for Employment Preparedness

Student Last Name: \_\_\_\_\_

Student First Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Counselor Name: \_\_\_\_\_

Core Content Courses (Day A or Day B)	
Select any/all that apply.	
English 12 (i21160)	<input type="checkbox"/>
VA/US Gov't (i22440)	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>

PEP Only Electives (Day A or Day B)	
Circle 1 or More	
General Music (20061)	<input type="checkbox"/>
FACS - Development (28222)	<input type="checkbox"/>
Personal Fitness I (27500)	<input type="checkbox"/>

PEP Classes - Double Block (Day A & Day B)	
Personal Living Finance (20055) - Block 2	<input checked="" type="checkbox"/>
Occupational Exploration (20999) - Block 3	<input checked="" type="checkbox"/>
Living Skills (20026) - Block 4	<input checked="" type="checkbox"/>
Instructional Studies (20028)	<input checked="" type="checkbox"/>

Full Time ACC Student Electives			
Write "1" in the box for your top choice elective. Write "2", "3", "4", to indicate backup electives.			
Art I (29120)	<input type="checkbox"/>	Engineering I - Intro to Engineering (28491)	<input type="checkbox"/>
Art II (29130)	<input type="checkbox"/>	Health Science (28303)	<input type="checkbox"/>
African American Studies (22371)	<input type="checkbox"/>	Digital Photography I (29193)	<input type="checkbox"/>
Psychology (22900)	<input type="checkbox"/>	Digital Photography II (29194)	<input type="checkbox"/>
Journalism Yearbook (21209)	<input type="checkbox"/>	Structured Literacy I (21122)	<input type="checkbox"/>
Journalism Newspaper (21205)	<input type="checkbox"/>	Structured Literacy II (21123)	<input type="checkbox"/>
DE Comparative Politics Social Studies Elective (92442W)	<input type="checkbox"/>		

*By signing below I acknowledge understanding of the following; I have reviewed my course requests with my counselor and my parent/guardian. I understand that my course requests are not final until they have been reviewed and approved by my high school counselor, NOVA DE Coordinator and NOVA DE Admissions Office. My course requests may change if I do not meet necessary course prerequisites and/or if I am ineligible to participate in NOVA DE courses due to admissions criteria.*

Student Signature: \_\_\_\_\_

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