

# UTICA HIGH SCHOOL

## Course Selection 2026-2027

### GRADE 11

CAREER GOAL: \_\_\_\_\_

Student Phone #: \_\_\_\_\_

**DUE DATE** - Students must input schedule into PowerSchool by **February 13, 2026**. Turn in completed forms to your **English teacher by January 30, 2026**. You will meet with your counselor individually in February.

### INSTRUCTIONS to Enter Schedule

- Log into PowerSchool on your school-issued computer (not your phone or tablet)
- Click on Grades / Attendance
- Click on Registration
- Click on PowerSchool Student Portal and Login
- Click Class Registration
- Click the box with the pencil icon for each category
  - Each full year class needs an **A** and a **B** version
  - You must select 6 credit hours and at least 2 alternates credit hours

### ENGLISH

☐ English 11 A/B B060A/B

OR

☐ OTHER \_\_\_\_\_

Did you discuss your English placement with your current English teacher? YES ☐ NO ☐

### SOCIAL STUDIES

☐ US Government C180

☐ Economics C150

OR

☐ AP US Government A/B C193A/BAP

### SCIENCE

Course Name	Course Code
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• _____	_____
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• _____	_____
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### MATH

CURRENT MATH CLASS: \_\_\_\_\_

☐ Algebra II A/B E120A/B

OR

☐ OTHER \_\_\_\_\_

Did you discuss your math placement with your current math teacher? YES ☐ NO ☐

### STUDENT NAME:

\_\_\_\_\_

Last

\_\_\_\_\_

First

\_\_\_\_\_

MI

**ELECTIVES** You have 2 hours for electives. You may not need all 4 lines. See [Course Selection Guide](#) for class name and code.

Course Name	Course Code
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• _____	_____
• _____	_____
• _____	_____
• _____	_____

**ALTERNATE CHOICES** Please realize there is a strong possibility that you may be scheduled into an alternate class. Please choose alternates that you are willing to take.

**\*MUST INCLUDE 1 SCIENCE ALTERNATE**

Course Name	Course Code
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• _____	_____
• _____	_____
• _____	_____
• _____	_____

### STUDENT AND PARENT / GUARDIAN SIGNATURES REQUIRED

**STUDENT:** I have carefully reviewed my course selections and alternate choices for attending **Utica High School** during the 2026–2027 school year. I understand that some of my selected courses may not be available if I attend UAIS, MST, CSI, MADE, or UHHS.

**PARENT/GUARDIAN:** My signature verifies my involvement in this process.

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

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

### ADVANCED PLACEMENT / ACCELERATED / HONORS COMMITMENT

**COMMITMENT:** Once schedules are finalized, course selections cannot be altered, and teacher requests will not be accommodated. By choosing to enroll in an Advanced Placement, accelerated, or honors course, students are committing to complete the course for the entire year. All course offerings are subject to change depending on enrollment. By signing below, you acknowledge and agree to the course selections for your student and the scheduling conditions outlined above.

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

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

## 4 YEAR PLAN

Please use the space below to map out the courses you have already taken and your plans for future years.

COURSE	9 <sup>th</sup> GRADE	10 <sup>th</sup> GRADE	11 <sup>th</sup> GRADE	12 <sup>th</sup> GRADE	GRADUATION REQUIREMENTS
ENGLISH					English 4.0
SOCIAL STUDIES					Social Studies 3.5 (Personal Finance)
SCIENCE					Science 3.0
MATH					Math 4.0
WORLD LANG					World Lang 2.0
HEALTH/PE					Health/PE 1.0
ELECTIVE					VPAA 1.0

### I HAVE QUESTIONS FOR MY COUNSELOR ABOUT:

- ☐ Course Selection / Career Path
- ☐ Credit Recovery
- ☐ Flex Option for 2<sup>nd</sup> year World Language and/or Physical Education
- ☐ Personal Curriculum
- ☐ Dual Enrollment
- ☐ School-to-Work Program
- ☐ Other: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

### COUNSELOR NOTES:

#### Utica High School

UHS Main Office: (586) 797-2200

School Website: <https://www.uticak12.org/uticahigh>

**Counseling Department:** Counselors are here to assist students and parents with a wide range of questions and concerns. We work with students on academic, scheduling, career, college, personal and social issues.

Students are assigned to counselors **alphabetically according to the student's last name**. We look forward to assisting you and your student during the years ahead.

Last Name or Grade Level	Counselor Name	E- Mail	Phone
A-GL	Shannon Donnellon	shannon.donnellon@uticak12.org	(586) 797-2361
Go-Har, AVID, HHS	Kelly Bronski	kelly.bronski@uticak12.org	(586) 797-2366
Has-N	Ilene Soto	ilene.soto@uticak12.org	(586) 797-2364
O-Z	Lindsey Dunn	lindsey.dunn@uticak12.org	(586) 797-2369