

ABBOTSFORD SENIOR SECONDARY SCHOOL

COURSE SELECTION FORM 2026-2027

GRADE 11

Last Name: _____

First Name: _____

Birthdate: _____ Parent e-mail: _____

**Abby Sr. students are required to enter their course requests in MyEd BC
Deadline date: 13 March 2026**

Program: Choose the program of study that best applies to you

- Regular:** Choose the 4 Required Courses, and 4 Electives, plus 2 alternates
- IB Diploma:** Choose 1 course from each number 1-6. TOK / CAS and EE will be your 7th and 8th courses
- IB Certificate:** Choose a combination of IB and Regular courses to equal 8 blocks, plus 2 alternates
- Career Program** you are interested in: _____

***See Mr Kleisinger for applications

Required Courses Teacher recommendations may change your requests

Regular Courses

1. English 11: Composition Literary Studies
New Media Spoken Language
2. SS11 Contemporary Indigenous Studies 12
Social Justice 12 Law 12 Political Studies 12
20th Century World History 12 Philosophy 12
3. Foundations of Math 11 Pre-Calculus 11
Workplace Math 11 History of Mathematics 11
4. Life Sciences 11 Chemistry 11 Physics 11
Earth Science 11 Science for Citizens 11

**Choose one course from each number above. For additional SS or Science courses request them in the elective section below.

IB Courses

1. IB English Literature HL 11
2. IB History HL 11
IB Philosophy HL 11 (double block courses)
3. IB Math: Analysis & Approaches SL 11
4. IB Biology SL 11 IB Physics SL 11
5. IB Chemistry HL 11 IB Business HL 11
IB Visual Arts HL 11 (double block courses)
6. IB French SL11

Elective Courses Select 4 electives from the Course List, PLUS at least 2 alternates.

Course Name

5. _____
6. _____
7. _____
8. _____

Alternate Courses

 choose at least 2 alternates

1. _____
2. _____
3. _____
4. _____

Extended Day Courses -taken in addition to the above 8 courses:

<input type="checkbox"/> Jazz Band 11	<input type="checkbox"/> Concert Band 11	<input type="checkbox"/> Drumline 11	<input type="checkbox"/> Yearbook 11
<input type="checkbox"/> PE Leadership 11	<input type="checkbox"/> Leadership 11	<input type="checkbox"/> Link Crew 11	<input type="checkbox"/> Media Broadcasting 11

Student Signature _____

Date: _____

Parent Signature _____

Date: _____

PLEASE RETURN SIGNED FORM TO THE COUNSELLING OFFICE