

**Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_ ID Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2025-2026 Harmony Middle School**

**Incoming 6th grade ELECTIVE COURSE SELECTIONS**

Students will have two periods of electives (one of which will be a semester of Physical Education).

Electives must add up to **2 total courses** (consider 1/2 year courses).

Please rank your **top 4** choices. Place a **1** next to your first choice, **2** next to your second choice, **3** for third choice, **4** for fourth.

Although every effort will be made to accommodate students’ requests, **selecting a course does not guarantee placement.**

\_\_\_\_\_ **13020006** Band 1 (Beginner) \*yearlong class

\_\_\_\_\_ **13020406** Orchestra 1 (Beginner) \*yearlong class

\_\_\_\_\_ **81001200 and 81002100** AGRICULTURE **\***yearlong class

\_\_\_\_\_ **01011107** Visual Art 1\*semester class

\_\_\_\_\_ **1006000** Journalism \*yearlong

\_\_\_\_\_ **1700110 AVID** – Advancement Via Individual Determination (Application and acceptance required) \*yearlong class

\_\_\_\_\_ **04000400** Acting 1 \*yearlong class (**This elective is NOT guaranteed to be offered. As of now HRMS**

**is only gauging interest.)**

\_\_\_\_\_ **8600090** STEM Integrated Technology \*semester class

\_\_\_\_\_ **82005200** Computer Business Technology \*semester class

\_\_X\_\_\_ **15080000** PHYSICAL EDUCATION (Gym) \*semester class

\***one semester per student per grade level is required unless a PE waiver is filed, see backside**

By signing below, you are stating that these are the courses that you have requested.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Parent Signature Date



**If you would like to have your child OPT OUT of the PE requirement, please complete the Physical Education Waiver below stating that your child is involved in physical activity outside of school.**

**(Please fill in ONLY if you are asking to OPT OUT of Physical Education)**

Harmony Middle School

Physical Education Waiver

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ request a PE waiver for my son/daughter,

(Parent Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the 2025-26 school year.

(Student Name & ID #)

I am requesting a PE waiver, because my child participates in the following physical activity (s) outside of school:

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Print Student Name Student ID

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Parent Name Parent Phone Number

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Parent Signature Date