

Dr. Rolando Espinosa K-8 Center
2016-2017
SIXTH GRADE SUBJECT SELECTION SHEET
SELECCIÓN DE CURSOS DE SEXTO GRADO

Office Use Only

1. _____
2. _____
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6. _____

Name (Nombre) _____ ID# _____

Part I

____ My child will not attend Dr. Rolando Espinosa K-8 Center for the 2016-2017 school year. *Mi hijo(a) no asistirá el Centro Escolar Dr. Rolando Espinosa K-8 Center para el año escolar 2016-2017.*

*****If not attending Dr. Rolando Espinosa K-8 Center do not complete the sections below*****

*****Si no asistirá el Centro Escolar Dr. Rolando Espinosa K-8 Center no complete las siguientes secciones *****

Part II Electives (To Be Completed By Student/Guardian)

CURSOS Electivos (Debe ser completado por estudiante / tutor)

From the courses listed below, select four courses in order of preference (using 1 for the most preferred and 4 for the least preferred).

Seleccione cuatro cursos en orden de preferencia (usando 1 para el más preferido y 4 para el menos preferido) de los cursos a continuación.

CHOICE OF ELECTIVE IS NOT GUARANTEED ELECCION DE CURSOS ELECTIVOS NO ES GARANTIZADO

K01	Two-Dimensional Studio Art 1
L01	Orchestra 1
L11	Band 1
G01	Advanced Academics (Gifted students only)

P01/P02	Comprehensive Physical Education (REQUIRED)
S02	Spanish for Spanish Speakers, Intermediate
S03	Spanish 1 (non-speakers)

*Students with FSA and/or i-Ready levels of 1 or 2 in Reading will be required to take Intensive Reading in the place of an elective.

Part III Required Courses (To Be Completed by School Personnel Only)

Cursos Requeridos (Completado solamente por el personal escolar)

Language Arts

CODE	TEACHER INITIALS

A01	Language Arts 1
A02	English 1 Cambridge Secondary (Advanced/Gifted)
A04	Language Arts 1 Through ESOL

Mathematics

CODE	TEACHER INITIALS

B01	Mathematics I
B02	Mathematics 1 Cambridge Secondary (Advanced/Gifted)

Reading

CODE	TEACHER INITIALS

R01	Intensive Reading
R06	Intensive Reading Plus

Science

CODE	TEACHER INITIALS

C01	Comprehensive Science 1
C02	Science 1 Cambridge Secondary (Advanced/Gifted)

ESOL

CODE	TEACHER INITIALS

E01	Developmental Language Arts ESOL I
E02	Developmental Language Arts - ESOL II
E03	Developmental Language Arts - ESOL III
E04	Developmental Language Arts - ESOL IV

Social Studies

CODE	TEACHER INITIALS

D01	M/J United States History
D02	M/J United States History (Advanced/Gifted)

STUDENT SIGNATURE(Firma del estudiante) _____

PARENT/ GUARDIAN SIGNATURE (Firma del tutor) _____

Date (Fecha) _____

Date (Fecha) _____

**Dr. Rolando Espinosa K-8 Center
2016-2017
SEVENTH GRADE SUBJECT SELECTION SHEET
SELECCIÓN DE CURSOS DE SEPTIMO GRADO**

Name (Nombre) _____ ID# _____

Office Use Only

1. _____
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Part I

My child will not attend Dr. Rolando Espinosa K-8 Center for the 2016-2017 school year. *Mi hijo(a) no asistirá el Centro Escolar Dr. Rolando Espinosa K-8 Center para el año escolar 2016-2017.*

*****If not attending Dr. Rolando Espinosa K-8 Center do not complete the sections below*****
*****Si no asistirá el Centro Escolar Dr. Rolando Espinosa K-8 Center no complete las siguientes secciones*****

Part II Electives (To Be Completed By Student/Guardian)
CURSOS Electivos (Debe ser completado por estudiante / tutor)

From the courses listed below, select four courses in order of preference (using 1 for the most preferred and 4 for the least preferred).
Selecione cuatro cursos en orden de preferencia (usando 1 para el más preferido y 4 para el menos preferido) de los cursos a continuación.

CHOICE OF ELECTIVE IS NOT GUARANTEED ELECCION DE CURSOS ELECTIVOS NO ES GARANTIZADO

K01/K12	Two-Dimensional Studio Art 1/2 Level _____
L01/L02	Band I/Band II Level _____
L11/L12	Orchestra I/ Orchestra II Level _____
N01/N12	Creative Writing I or II Level _____
P11/P12	Comprehensive Physical Education (REQUIRED)

G01	Advanced Academics (Gifted students only)
S02/S11	Spanish for Spanish Speakers, Intermediate or Spanish for Spanish Speakers 1 Level _____
S03/S04	Spanish Speakers 1/2 (non-speakers) Level _____

*Students with FSA and/or i-Ready levels of 1 or 2 in Reading will be required to take Intensive Reading in the place of an elective.

Part III Required Courses (To Be Completed by School Personnel Only)

Cursos Requeridos (Completado solamente por el personal escolar)

Language Arts

CODE TEACHER INITIALS

A11	Language Arts 2
A12	English 2 Cambridge Secondary (Advanced/Gifted)
A14	Language Arts 2 Through ESOL
A10	M/J 6 th grade Course Recovery

Reading

CODE TEACHER INITIALS

R11	Intensive Reading
R07	Intensive Reading Plus

ESOL

CODE TEACHER INITIALS

E11	Developmental Language Arts ESOL I
E12	Developmental Language Arts - ESOL II
E13	Developmental Language Arts - ESOL III
E14	Developmental Language Arts - ESOL IV

Mathematics

CODE TEACHER INITIALS

B11	M/J Mathematics 2
B12	Mathematics 2 Cambridge Secondary (Advanced)
B13	Algebra I Honors/ Gifted
B10	M/J 6 th grade Course Recovery

Science

CODE TEACHER INITIALS

C11	Comprehensive Science 2
C12	Science 2 Cambridge Secondary (Advanced/Gifted)
C10	M/J 6 th grade Course Recovery

Social Studies

CODE TEACHER INITIALS

D11	M/J Civics
D12	M/J Civics, Advanced/Gifted
D10	M/J 6 th grade Course Recovery

STUDENT SIGNATURE(Firma del estudiante) _____

PARENT/ GUARDIAN SIGNATURE (Firma del tutor) _____

Date (Fecha) _____

Date (Fecha) _____

Office Use Only

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**Dr. Rolando Espinosa K-8 Center
2016-2017
EIGHTH GRADE SUBJECT SELECTION SHEET
SELECCIÓN DE CURSOS DE OCTAVO GRADO**

Name (Nombre) _____ ID# _____

Part I

My child will not attend Dr. Rolando Espinosa K-8 Center for the 2016-2017 school year. *Mi hijo(a) no asistirá el Centro Escolar Dr. Rolando Espinosa K-8 Center para el año escolar 2016-2017.*

*****If not attending Dr. Rolando Espinosa K-8 Center do not complete the sections below*****
*****Si no asistirá el Centro Escolar Dr. Rolando Espinosa K-8 Center no complete las siguientes secciones *****

Part II Electives (To Be Completed By Student/Guardian)

CURSOS Electivos (Debe ser completado por estudiante / tutor)

From the courses listed below, select four courses in order of preference (using 1 for the most preferred and 4 for the least preferred).
Selecione cuatro cursos en orden de preferencia (usando 1 para el más preferido y 4 para el menos preferido) de los cursos a continuación.

CHOICE OF ELECTIVE IS NOT GUARANTEED ELECCION DE CURSOS ELECTIVOS NO ES GARANTIZADO

K01/K12/K23	Two-Dimensional Studio Art 1/2/3 Level _____
L11/L12	Orchestra I/Orchestra II /Orchestra III Level _____
L01/L02	Band I/Band II/Band III Level _____
N01/N12	Creative Writing I/II Level _____
P21/P22	Comprehensive Physical Education (REQUIRED)

S02	Spanish 1 or 2 for non-Speakers Teacher Approval Required
S21	Spanish 1 or 2 for Spanish Speakers 8 th grade Teacher Approval Required
G01	Advanced Academics (Gifted)

*Students with FSA and/or i-Ready levels of 1 or 2 in Reading will be required to take Intensive Reading in the place of an elective.

Part III Required Courses (To Be Completed by School Personnel Only)

Cursos Requeridos (Completado solamente por el personal escolar)

Language Arts

CODE TEACHER INITIALS

Reading

CODE TEACHER INITIALS

ESOL

CODE TEACHER INITIALS

A21	Language Arts 3
A22	English 3 Cambridge Secondary (Advanced/Gifted)
A24	Language Arts 3 Through ESOL
A20	M/J 7 th grade Course Recovery

R21	Intensive Reading
R08	Intensive Reading Plus

E21	Developmental Language Arts ESOL I
E22	Developmental Language Arts - ESOL II
E23	Developmental Language Arts - ESOL III
E24	Developmental Language Arts - ESOL IV

Mathematics

CODE TEACHER INITIALS

Science

CODE TEACHER INITIALS

Social Studies

CODE TEACHER INITIALS

B21	M/J Mathematics 3 (Pre-Algebra)
B22	Algebra 1 Honors
B23	Geometry Honors/Gifted
B20	M/J 7 th grade Course Recovery

C21	M/J Comprehensive Science 3
C22	Physical Science, Honors/Gifted
C20	M/J 7th grade Course Recovery

D21	M/J U.S. History and Career Planning
D22	M/J U.S. History and Career Planning Advanced/Gifted
D20	M/J 7 th Grade Course Recovery

STUDENT SIGNATURE(Firma del estudiante) _____

Date (Fecha) _____

PARENT/ GUARDIAN SIGNATURE (Firma del tutor) _____

Date (Fecha) _____

Physical Education Waiver Option

Dear Parent or Guardian:

The 2008 Legislature passed Senate Bill 610 which was signed into law by Governor Crist on June 2, 2008. It included changes in State Statute as it relates to the physical education requirements for students in Florida.

To encourage students to become more physically active and to help students develop healthy lifestyles, Senate Bill 610 requires the equivalent of one class period per day of physical education for a minimum of one semester each year for students in grades 6 through 8 beginning in the 2009-2010 school year.

The physical education requirement shall be waived for a student who meets one of the following criteria:

- The student is enrolled or required to enroll in a remedial course.
- The student's parent or guardian indicates in writing to the school that the student is enrolled in another course from among those offered as options by the school District.

This Statute requires each school board to notify parents of the options available to them prior to scheduling a student in physical education. Unless your child meets one of the waiver criteria listed above, he/she will be enrolled in physical education for a minimum of one semester of each year while in grades 6 through 8.

Please contact your school administration if you have questions or concerns regarding the physical education requirements or waiver criteria.

Please mark one of the following an x

I request that my child's Physical Education requirement for the 2016 -2017 school year be waived.

I accept my child's enrollment in Physical Education for the 2016-2017 School Year

Student Name: _____

Grade _____

Parent Signature _____

Opción de exclusión de educación física

Estimados padres de familia o tutores:

La Legislatura de 2008 aprobó el Proyecto de Ley 610, el cual se convirtió en ley con la firma del Gobernador Crist el 2 de junio de 2008. Dicha ley incluye cambios a los estatutos estatales que se relacionan con los requisitos de la educación física para los estudiantes de la Florida.

Con el fin de animar a los estudiantes a que se hagan más activos físicamente y a que desarrollen estilos de vida más saludables, el Proyecto de Ley 610 requiere el equivalente de un período de clase de educación física diario, por un mínimo de un semestre cada año para los estudiantes que cursen los grados comprendidos entre el sexto y el octavo, a partir del año escolar 2009-2010.

El requisito de educación física no se aplicará a los estudiantes que satisfagan uno de los siguientes criterios:

- El estudiante está matriculado o se le ha requerido que se matricule en un curso remedial.
- Uno de los padres de familia o tutores del estudiante indica a la escuela, por escrito, que el estudiante está matriculado en otro curso de los que el distrito ofrece como opciones.

Dicho estatuto requiere que cada una de las juntas escolares notifique a los padres de familia en cuanto a las opciones a su disposición antes de matricular al estudiante en educación física. A menos que su hijo o hija satisfaga uno de los criterios para la exención anteriormente mencionados, se le matriculará en educación física por un mínimo de un semestre por cada año escolar mientras estén cursando los grados comprendidos entre el sexto y el octavo.

Por favor, comuníquense con el administrador de su escuela si tuviesen alguna pregunta o inquietud respecto a los requisitos de educación física o a los criterios para el documento de exención.

Favor de escoger unas de las dos opciones con un (x)

Deseo que mi hijo o hija no sea matriculado en Educacion Fisica durante el año escolar 2016-2017.

Deseo que mi hijo o hija sea matriculado en Educacion Fisica durante el año escolar 2016-2017.

Nombre del Estudiante: _____

Grado _____

Firma de los Padres _____