



Student Name:

Required Courses

English, Science, Social Studies, and Math are required full year courses. PE is a required semester course. In addition to those courses, students may choose elective courses totaling 10 quarters. Information regarding all course options may be found on the website, www.bluevalleyk12.org, under Academics, Middle School.

Math Courses

Students will be enrolled according to teacher recommendation/assessment data.

Elective Courses

Elective courses are either 1, 2 or 4 quarters in length. Students will have 10 quarters of elective courses. Please indicate your selections below.

Music a	nd World Language (Option	al Choices)	Please in	dicate your desire to take a	a course by marking (X) on
the corr	esponding line.				
	Beginning Band 6 (4 quarters				
Clarinet	., Saxophone, Oboe, Bassoor	ı, Trumpet, I	French Ho	orn, Trombone, Baritone, o	r Tuba
B	Beginning Strings 6 (4 quarte	rs) No previ	ous exper	ience required.	
S	Strings 6 (4 quarters) Previou	s strings exp	erience r	equired.	
\	ocal Music 6 Full Year (4 qua	arters)			
	Spanish 1A (2 quarters) Prere taken in 8 th grade.	quisite for S	panish 1	3. Spanish 1B may count fo	or HS credit, if Spanish 2 is
	Chinese 1A (2 quarters) Prere taken in 8 th grade.	equisite for (Chinese 1	B. Chinese 1B may count fo	or HS credit, if Chinese 2 is
-	ly take if a student is curren				
	Chinese Language Arts (4 qua	arters)	0	nline PE* (1st Semester On	ly – Optional)
	Chinese Humanities 6* (2 qu				s)
*Option	al Elective Class when enrolled	d in Chinese I	mmersior	Program	
Please	rank the additional elective	courses froi	m 1 (first	choice) to 10 (last choice).	
All cour	ses are 1 quarter, with the e	xception of	Additiona	l Semester of PE.	
	Exploring Foods 6*		Tech	nology Explorations 6	
	My Style 6*		Pre-E	ngineering 6*	
	Modern Communicat	ions 6	Thea	ter 6	
	Study Hall		Vocal	Music 6 Semester (2 quar	ters)
	Visual Arts 6* (Taking	Art 6, 7, and	d 8 waive	s the art prerequisite in HS	5.)
	Additional Semester of	of PE (2 quai	rters) (Sp	ace is limited.) * Note: Cla	ss has a fee.
	Parent Signature	Date		Student Signature	 Date

Important Points to Consider

This document is used to create your class schedule. We work hard to enroll each student in the classes that have been selected and give students their top elective choices. However, class size, staff availability, and time slots may impact the student's schedule.

Please review the following checklist prior to turning in your completed form.

- · Review the elective course list
- If your student has an IEP, please consult your child's case manager before completing the enrollment form.
- Thoughtfully rank the additional elective courses

If you have any questions, please contact:

Roxanne Quinn

All 6th - 8th grade students, last names A-L RHQuinn@bluevalleyk12.org 913-239-5418

Buomkuoth Lual

All 6th - 8th grade students, last names M-Z BPLual@bluevalleyk12.org 913-239-5417

MOVING?

If you are planning to move, please contact
Melanie Rockers, Registrar.
MARockers@bluevalleyk12.org
913-239-5416

Middle School Math Courses

Course placement is determined by iReady test scores.

On-level Courses and Content

Math 6	Math 7	Math 8
6 th Grade	7 th Grade	8 th Grade
Standards	Standards	Standards

Accelerated Courses and Content

Accelerated Math 6		Accelerated Math 7		Algebra 1	
6 th Grade	7 th Grade	7 th Grade	8 th Grade	Algebra 1	
Standards	Standards	Standards	Standards	Standards	

Overland Trail Middle School Education History

Student Name	Date
Current Grade Level	
Date Student Entered U.S. School	
Date Student Entered Kansas School	

Grade Level	Dates	School Name	Public or Private	School Address	School Phone#
Kindergarten					- Industrial American
1st Grade					
2 nd Grade					
3 rd Grade					
4 th Grade					
5 th Grade					:
6 th Grade					
7 th Grade					_
8 th Grade		6			



Overland Trail Middle School 6201 W. 133rd St Overland Park, KS 66209

Phone: 913-239-5416 Fax: 913-239-5449 Email: marockers@bluevalleyk12.org

Address:	
Phone Number:	Fax Number:
The following student(s) have	enrolled in our school:
Name:	Grade:
Name:	
Please provide the following st	tudent records:
Birth Certificate:	
Academic Information:	
Transcripts:	
Standardized Test Scores:	
Attendance:	
Discipline Records:	
Health Records & Immunizations	s:
IEP/504, if applicable:	
	nended in Section 99.34, PL 35-568. No parent signature is sent to another educational agency.
Parent/Guardian Signature: _	
Date:	