San Diego Unified School District Office of School Innovation and Youth Integrated Services

International School History Form

Student Name:			Last school y	ear & grade level	:	
International School:						
Address:						
International School Ema						
Provide: legend of grad			~			
Parent(s) name(s):						
Telephone:						
Student speaks and under	rstands what lar	nguage(s)?				
What year did stu	udent first start	school?	(example 20	003 grade 1)		
 How many school 	ol years are mar	ndatory? 10,	11, 12 or 13 (circle	e one)		
 What month does 	s the school yea	ar begin?	End	?		
• What months is t	he school break	ς?				
 What time did sc 	hool start?	What	time did school en	d?		
		_	Science Othe			
	mpleted : Algel	ora 1 🔲 Geome	try 🔲 Algebra 2	Pre-Calculu	s \square	_
What school year did you take the following	Algebra 1	Algebra 2	Geometry 1	Geometry 2	Pre-Calculus	
courses?]
Science complet	ed: Biology	Chemistry	Physics			
What school						
year did you	Biology	Chemistry	Physics			
take the						
following						
courses?						
World History (completed: Y/N	J? If ves what	grade level?			
· World History	completed: 171	11 yes, what	grade level.	-		
PLEASE COM	PLETE BACK	C PAGE BY INI	DICATING WHAT	T DAYS OF THI	E WEEK EACH	I COURSE
			MBER OF HOUR			
VVIID III			WIDER OF HOUR	SIER DITTO	K Litell coci	LOL.
I have provided an officia	al transcript fro	m my school. Y	es No (circle one	e)		
If NO, an official transcri	ipt must be prov	vided within 30 d	lays - by date:	//_		
I have ancivered the above	_				_	
I have answered the abov	e questions and	d completed the b	eack section to the b	est of my knowle	dge:	
Parent signature:	_	_				

			Mathematics:			
Days of the week attended & total hours per day:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Algebra						
Geometry						
Pre-Calculus						
			Science			
Biology						
Chemistry						
Physics						
			History			
World History						
			English			
English						
			Home Language			
Language:						
			Arts			
Fine Art Type:						
Practical Art Type:						
		P	Physical Educatio	n		
PE						
			Other Electives			
Type:						
Type:						
Type:						

Please complete your daily school schedule:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
School start						
time:						
School end						
time:						