

ALLEGANY COUNTY PUBLIC SCHOOLS REGISTRATION AND INFORMATION FORMS

PMF - 1 (Revised 3/25/2021)

Entry Code & Date

Pupil Number

PLEASE TYPE OR PRINT PLAINLY

SCHOOL _____		GRADE <input type="text"/>	HOMEROOM <input type="text"/>	BUS NO. <input type="text"/>
LAST NAME <input type="text"/>		FIRST NAME <input type="text"/>	MIDDLE NAME <input type="text"/>	
MAILING ADDRESS <input type="text"/>		CITY <input type="text"/>	STATE <input type="text"/>	ZIPCODE <input type="text"/>
RESIDENTIAL ADDRESS (IF DIFFERENT THAN MAILING ADDRESS) <input type="text"/>		CITY <input type="text"/>	STATE <input type="text"/>	ZIPCODE <input type="text"/>
PRIMARY PHONE NUMBER <input type="text"/>	BIRTH DATE <input type="text"/>	Birth Date Verified by School Officials _____	Verification of Birth _____	
ALTERNATE PHONE NUMBER <input type="text"/>	MASS NOTIFICATION OPT-IN <input type="checkbox"/> Yes <input type="checkbox"/> No	Place of Birth _____	City _____	State/Nation _____

FEMALE <input type="checkbox"/>	MALE <input type="checkbox"/>	NON-BINARY <input type="checkbox"/>
HISPANIC or LATINO <input type="checkbox"/> Yes <input type="checkbox"/> No		
RACE <i>Using RACE CODE numbers below indicate the STUDENT's race</i> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
1 American Indian or Alaskan Native 2 Asian 3 Black or African American 4 Native Hawaiian or Other Pacific Islander 5 White		

Primary Language of Pupil _____		Primary Language of Home _____	
Did your child EVER attend an Allegany County Public School?			
No _____	If Yes, _____	SCHOOL _____	YEAR _____
Did your child attend Kindergarten?		<input type="checkbox"/> Public	<input type="checkbox"/> Non-Public
No _____	If Yes, _____		
Has your child ever been retained?		Grade _____	When _____
No _____	If Yes, _____		

School Last Attended _____	Previous County _____
School Address _____	
Contact Person _____	Phone Number (_____) _____
	(Area Code) X X X - X X X X

Additional Information/Special Services <input type="checkbox"/> (Check all that apply)		
AREA	YES	NO
SPECIAL EDUCATION	<input type="checkbox"/>	<input type="checkbox"/>
HOMELESS	<input type="checkbox"/>	<input type="checkbox"/>
504	<input type="checkbox"/>	<input type="checkbox"/>
MIGRANT	<input type="checkbox"/>	<input type="checkbox"/>
FOREIGN EXCHANGE	<input type="checkbox"/>	<input type="checkbox"/>
ENGLISH LANGUAGE LEARNERS	<input type="checkbox"/>	<input type="checkbox"/>
ELL ENTRY INTO THE US DATE	<input type="text"/>	<input type="text"/>

Child Lives with: <input type="checkbox"/> Both Parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other _____			
Military Connected Indicator: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
Please list brothers and sisters in order of their birth living in residence stated above.			
BROTHERS		SISTERS	
Name: Last, First Middle	Birth Date	Name: Last, First Middle	Birth Date

MALE HEAD OF HOUSEHOLD	
Name _____	
Father <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other	Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Email _____	
Employer _____	
Address _____	
Job Title _____	Phone _____
Years of Education _____	Degree _____
Male Parent if Different From Head of Household <input type="checkbox"/> Living <input type="checkbox"/> Deceased	
Name _____	
Address _____	
Parent's Signature _____	Date _____

FEMALE HEAD OF HOUSEHOLD	
Name _____	
Mother <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other	Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Email _____	
Employer _____	
Address _____	
Job Title _____	Phone _____
Years of Education _____	Degree _____
Female Parent if Different From Head of Household <input type="checkbox"/> Living <input type="checkbox"/> Deceased	
Name _____	
Address _____	
PPW Signature _____	Date _____

☐ Y - Release Directory Information
☐ M - Release Directory Information to all but Military Recruiters (JR & SR only)
☐ D - Do not release Directory Information to ACPS Directory (student will not be in yearbook or honor roll lists)

