ALLEGANY COUNTY PUBLIC SCHOOLS REGISTRATION AND INFORMATION FORMS

PMF - 1 (Revised 7/1/16)

Entry Code & Date	FMF -	1 (Revised //1/10)	Pupil Number							
Zana, como de Zano	PLEASE T	YPE OR PRINT PLAINLY	- upil - umisel							
			Pupil's Social Security No.							
SCHOOL	GI	RADE HOMEROOM	BUS NO.							
LAST NAME	FIRST NAME		AIDDLE NAME							
MAILING ADDRESS		CITY	STATE ZIPCODE							
DEGENERAL ADDRESS (FEDER	EDENT WHAN MAN ING A DDD									
RESIDENTIAL ADDRESS (IF DIFF	ERENT THAN MAILING ADDRI	ESS) CITY	STATE ZIPCODE							
PRIMARY PHONE NUMBER	BIRTH DATE	Birth Date Verified	Verification							
		by School Officials	of Birth							
ALTERNATE PHONE NUMBER	SCHOOL MESSENGER									
	OPT-IN Yes No	Place of Birth City	State/Nation							
EMALE MALE		Primary Language of Pupil	Primary Language of Home							
EMALE MALE ISPANIC or LATINO Yes	¬ No	Did your child EVER attend an Allegany Cou	mty Public School?							
Using RACE CO.	DE numbers below	No If Yes,	SCHOOL YEAR							
	TUDENT's race	r child attend Kindergarten?	Public Non-Public							
1 American Indian or Alaskan Native		No	If Yes,							
2 Asian 3 Black or African American		our child ever been retained?								
4 Native Hawaiian or Other Pacific Island5 White	er	No	If Yes, Grade When							
chool Last										
ttendedchool		Previous County								
ddress	Street	City	State ZipCode							
Contact Person	nect									
	Full Name	(An	ea Code) X X X - X X X							
Additional Information/Specia			Mother Other							
AREA SPECIAL EDUCATION	YES NO Please	list brothers and sisters in order of their BROTHERS	birth living in residence stated above. SISTERS							
HOMELESS	Name: Last, First Mic		Last, First Middle Birth Date							
504 IMMIGRANT										
MIGRANT ENGLISH LANGUAGE LEARNERS										
FOREIGN EXCHANGE										
MALE HEAD OF	F HOUSEHOLD	FFMALE	HEAD OF HOUSEHOLD							
ame	<u> </u>	Name	_							
	Citizen Yes No	Mother Yes No	First Middle Other Citizen Yes No							
ather Yes No Other mployer	Citizen Yes No	Employer	Other Chizen res ino							
ddress		Address								
ob Title	Phone		Job Title Phone							
ears of Education	Degree	Years of Education								
ale Parent if Different From Head of Hous	sehold	Female Parent if Different From He	ad of Household							
Living	Deceased	Living	Deceased							
ame		Name								
ddress		Address								
Parent's	Date	PPW	Date							
Signature		Signature								
Y - Release Directory Information M - Release Directory Information to all but		Principal's	Date							
D - Do not release Directory Information to	ACPS Directory (student will not be in	Signature	Dan							

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P	Pupil Numbe	er		L	AST NAME] [RST NAMI	Ξ				MIDDLE N	IAME	
						TRANSFEI	RRIN									
					7th/8th Grade			9th Grade								
SUBJECT			*School	**Course	Course Equivalent		School Final	Year	*Scho	ool	**Course	Course Equi		T	School Final	Year Course
ENGL	icu	Gr	Code	Number	'	Course Name	Grade	Credit	Cod	le	Number		Course N	ame	Grade	Credit
FINE A							<u> </u>			+						
MAT				1			Π									
PE																
HEAL	TH															
SOCIAL ST	TUDIES															
SCIEN	NCE															
TECH	ED				-		•	•								
WORLD LA	NGUAGE															
ADVANCE	ED TECH															
CAREER &																
FINANCIAL I					~~~~~											
ELECT						E LEARNING				_						
ELECT	edits Earned		VERI	FIED:	YES NO	HOURS EARNED:				-	-				-	
1 otal Cre	edits Earned								<u> </u>							
					10th Grade							11th Gra				
SUE	ВЈЕСТ		*School	**Course	Course Equival	Course Name	School Final	Course	* Sch		**Course	Course Equi	Course N	Iame	School Final	Course
FN	GLISH		Code	Number		course rvanic	Grade	Credit	Cod	le	Number		Course	danic	Grade	Credit
	E ARTS						<u> </u>			+						
	IATH															
	PE															
HE	EALTH															
SOCIAL	L STUDIES															
SCI	IENCE															
TEC	CH ED															
	LANGUAGI															
	ICED TECH															
	& TECH EI									_						
	AL LITERAC	Y								-					+	
	ECTIVE ECTIVE									_	-					
	edits Earned									+						
							1								l	l
	RECOMMENDED COURSES					4	OC	*SCHOOL CODES OC Out of County (MD) HI Home Instruction								
SUBJECT	Course Numl	oer	COURSE NAME					os			of State/Pri		HI SS		er School	
ENGLISH									**	Jon-A	ACPS Co	urse Electi	ves . Must	include Course Descr	rintion	
FINE ARTS							1	100	_		cr. Elective		050	1/2 cr. I		
MATH	ļ	_]				RCC/HSA	(High Schoo		ent) RESULTS		
PE	<u> </u>	_[J	HS	A/PARC	C	Date Take	n Scale Score	Pass / Fail	*OC/OS		unty licable)
HEALTH								ALGE	BRA I PAR	.CC						
SOCIAL							1	GEOM	IETRY PAR	RCC		1				
STUDIES	-	+					-					+	 			
SCIENCE								ALGE	BRA II PAF	RCC		1				
TECH ED								ENGL	ISH 10 PAR	RCC						
WORLD LANGUAGE							1	ENGLI	ISH 11 PAF	RCC					İ	
ADVANCED	<u> </u>	+					Ī	DIO	LOGY HS	Δ		+				
TECH CAREER &	1	-					-					+				
TECH ED]	GOVE	RNMENT I	ISA						
FINANCIAL LITERACY			_	_				_	EIDC	יבוב הבח	Mana .	NITO OT	TOP	DE	_	_
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			CAR	EER CLU			J		111	1314	1 5011				FISCA	LYEAI
Δ Δ	rts, Media &	Comm	uin	Select O	ne F Health and Bio	osciences		PP	w							
_								Signa						Г	Date	
B Bu	usiness Mgm	t & Fir	nance		G Human Resou	rce Services										
C Co	onstruction a	nd Dev	el.		H Information T	echnology		Guid								
D Co	ons. Svc, Hos	s. & To	ourism		I Manuf Engin	eering & Tech.		Signa	uure					Ι	Date	
						-		Princ	ipal's							
E En	iviro., Ag. &	nat.R	es.Sys		J Transportation	1 1 есп.]	Signa	-					Г	Date	
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