

Review Your Answers

Ask for your test book back so you can see the questions.

Key:
 ✓ Correct
 ○ Incorrect
 ○ Incorrect
 e Easy
 m Medium
 h Hard
 Alg Algebra
 A/T Arithmetic
 Geom Geometry

SECTION 1

Sentence Completions: [REDACTED]

Analogies: [REDACTED]

Critical Reading: [REDACTED]

SECTION 2

Sentence Completions: [REDACTED]

Analogies: [REDACTED]

Critical Reading: [REDACTED]

SECTION 3

Critical Reading: [REDACTED]

SECTION 4

Student-Produced Responses

1	2	3	4	5	6	7	8	9	10
11	12	13	14	15	16	17	18	19	20
21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40

You answered correctly 3 of 10 total questions and earned [REDACTED] points.

You answered 9 question(s).
 You answered incorrectly 4 question(s) and lost 8 point(s).

SECTION 2

Standard Multiple-Choice: [REDACTED]

SECTION 4

Quantitative Comparisons: [REDACTED]

SECTION 5

Identifying Sentence Errors: [REDACTED]

Improving Paragraphs: [REDACTED]

You answered correctly 4 of 10 writing skills questions and earned [REDACTED] points.

You answered 11 question(s).
 You answered incorrectly 4 question(s) and lost 8 point(s).

SECTION 5

Improving Paragraphs: [REDACTED]

Improving Paragraphs: [REDACTED]

You answered correctly 4 of 10 writing skills questions and earned [REDACTED] points.

You answered 11 question(s).
 You answered incorrectly 4 question(s) and lost 8 point(s).

Entry Requirements

Enter in information you provide on your answer sheet.

Full-time high school student: YES

Year to complete high school and attend full time in college: 2009

Year to be spent in grades 9-12: 4

US citizen: YES

Based on your responses, you are not recommended to enter NMSC's 2004 programs. If you are among the 55,000 high scorers who qualify for program recognition, you will be notified next September.

Your Educational Plan

Grade Average: B

College Major: [REDACTED]

Career

Information about 5 self-reports

Description: no matter what you plan to do after high school, you will be better prepared for future education and the job market if you take as many academic courses in high school as possible. Most colleges will require you to have completed 4 years of English, 3 to 4 years of general mathematics (such as algebra or geometry), and 2 to 4 years of social studies or history. Course in foreign language, music, art, and communication are equally helpful.

By taking these courses, you are developing skills that employers require, as well as ones that prepare you for higher education.

Most colleges require you to take a broad range of courses in your first few years so that you can discover, develop, and explore your interests. You will probably be required to take courses in the liberal arts, history, literature, the arts, foreign languages, social sciences, mathematics, and natural sciences. Through the study of these you develop general knowledge. If you know what you want to major in, you can begin to take courses in that field. If you aren't sure, you can use these two years to make up your mind.

Improve Your Skills

The skills listed are based on your individual performance on the test.

Follow the suggestions to improve in each area.

Understanding tone
How to improve: When reading, consider how an author's choice of words might define his or her attitudes. Pay attention to the way a writer's tone conveys meaning in conversation and in the media.
 See questions 17, 18.

Recognizing a definition when it is presented in a sentence
How to improve: Learn how such elements as appositives, subordination, and punctuation are used to define words in a sentence.
 See questions 3, 5, 30.

Understanding analogies or analogies that deal with abstract ideas
How to improve: Broaden your reading to include newspaper editorials, political essays, and philosophical writings.
 See questions 8, 10, 11.

Your pattern of correct and incorrect responses does not provide clear evidence about your specific math strengths and weaknesses. Still, your score report can provide valuable insights that may help you improve. We recommend that you look at the questions you got wrong to see if you made careless errors or if you need to review certain skill areas. Math teachers have identified the following areas as a good place to begin improving math problem-solving skills.

Using basic concepts and operations in arithmetic problem solving
How to improve: Practice solving problems involving fractions, decimals, ratios, percent, exponents, square roots, place value.

Applying rules in algebra and geometry
How to improve: Review algebra rules (such as exponents, solving equations and inequalities) and geometry rules (such as measures of angles associated with parallel lines). Become familiar with geometric formulas at the beginning of math sections of the test, and practice problems that use them.

Your pattern of correct and incorrect responses does not provide clear evidence about your specific writing strengths and weaknesses. Still, your score report can provide valuable insights that may help you improve. We recommend that you look at the questions you got wrong to see if you made careless errors or if you need to review your writing skills.

Following conventions in writing
How to improve: Review the chapters in a grammar book that cover grammatical conventions, such as verb choice, use of noun and prepositional phrases, and sentence construction. Work with your teacher to become more familiar with the conventions of standard written English.

Recognizing improper pronoun use
How to improve: Learn to understand the distinction between informal, spoken pronoun usage and standard written pronoun usage. Review the way you use pronouns in your own writing. Ask your teacher to help you identify and correct pronoun errors in your own writing.



STUDENT HEALTH EXAMINATIONS

Date 7/6/98

Student's Full Name [Redacted] Phone _____ Age _____ Race _____ Sex _____

Address _____ Birthdate _____

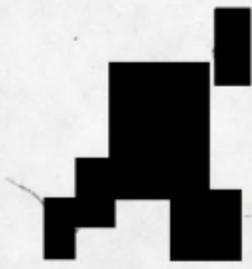
Name of Parent or Guardian _____ School _____

A. HEALTH EXAMINATION

Height [Redacted] Blood Pressure _____

(/) Normal=N; Abnormal=A	N	A
1. Appearance		
2. Skin/Nose		
3. Head/Scalp		
4. Eyes		
5. Visual Acuity (R & L)		
6. Ears		
7. Auditory Acuity (R & L)		
8. Nose / Throat		
9. Mouth, Teeth and Gums		
10. Chest / Lungs		
11. Heart		
12. Abdomen		
13. Genitals and Anus		
14. Musculo-Skeletal		
15. Neurological		
16. Alertness		
17. Emotional / Mental/ Behavior Prob.)		
18. Handicap, physical/ other (Specify)		
19. Activity Restrictions (Specify)		
20. Abuse, substance/ physical / emotional		
21. Nutrition		
22. Other		

COMMENT: Abnormal Findings, by number



B. HEALTH HISTORY (Serious Illnesses Injuries: explain) None

(attach narrative if additional space needed)

C. LABORATORY (as indicated)

Hemoglobin/Hematocrit _____ Stool (O & P) _____ Tuberculin test: _____
Lead _____ Sickle Cell _____

NAME: _____

TITLE: _____

ADDRESS: _____

(Please Print)

[Redacted Signature]

Authorized Signature

7/6/98
Date

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
CUMULATIVE SCHOOL HEALTH RECORD
 (This form is not intended for physician's use)

Special Health Problems - See Narrative _____

Name _____ Race W Sex F School _____

Address _____ Father's Name _____

_____ Mother's Name _____

Date of Birth / / Place of Birth West Palm Beach, FL Birth Recorded: Yes No

Immunization Certification: Yes No

Special Immunization Programs _____

A NARRATIVE NOTE IS REQUIRED FOR REFERRAL AND OUTCOME ENTRIES

Screening and Assessment Grades K-3	K			1			2			3		
	Screening Date	Referral	Outcome									
Vision												
Hearing												
Height, Weight & Graphing												
Nutrition												
Dental Health												
Mental Health												
Communicable Disease												
Records Review												
Physical Assessment												
Other												
Other												

Screening and Assessment Grades 4-8	4			5			6			7			8		
	Screening Date	Referral	Outcome												
Vision															
Hearing															
Height, Weight & Graphing															
Nutrition															
Dental Health															
Mental Health															
Communicable Disease															
Records Review															
Physical Assessment															
Scoliosis															
Other															
Other															

Good Samaritan Hospital, Inc.
West Palm Beach, Florida

BIRTH CERTIFICATE

This Certifies that [REDACTED]
was born to [REDACTED] in this Hospital
at 5:32 P.M. on [REDACTED] the [REDACTED] day of [REDACTED]

In Witness Whereof the said Hospital has
caused this Certificate to be signed by its duly
authorized officer and its Official Seal to be
hereunto affixed.

[REDACTED]
President

[REDACTED]
Attending Physician





FLORIDA CERTIFICATE OF IMMUNIZATION (HRS 680 - PART A)

(Florida Statutes 232.032)

FOR CHILDREN WHO HAVE COMPLETED ALL REQUIRED IMMUNIZATIONS FOR SCHOOL ATTENDANCE

DATE OF BIRTH

[Redacted]

CHILD'S NAME

[Redacted]

MO DA YR

[Redacted]

PARENT OR GUARDIAN

DOCTOR: PART A OF THIS FORM IS USED ONLY IF THE CHILD HAS RECEIVED ALL REQUIRED IMMUNIZATIONS LISTED BELOW. IF NOT, SEE REVERSE SIDE.

DTP - 5 DOSES REQUIRED

[Redacted]

IF THE FOURTH PRIMARY DOSE OF DTP IS ADMINISTERED ON OR AFTER THE FOURTH BIRTHDAY, A FIFTH DOSE IS NOT REQUIRED.
DT (PEDIATRIC) VACCINE IS ACCEPTABLE IF PERTUSSIS VACCINE IS MEDICALLY CONTRAINDICATED. (COMPLETE PART C FOR PERTUSSIS CONTRAINDICATION.)
Td (ADULT) VACCINE (A SERIES OF 3 DOSES) IS ACCEPTABLE AND RECOMMENDED FOR CHILDREN 7 YEARS OF AGE OR OLDER.

POLIO (TOPV) - 4 DOSES REQUIRED

[Redacted]

MO DA YR MO DA YR MO DA YR MO DA YR

IF THE THIRD PRIMARY DOSE OF TOPV IS ADMINISTERED ON OR AFTER THE FOURTH BIRTHDAY, A FOURTH DOSE IS NOT REQUIRED.
POLIO VACCINE IS OMITTED FROM THE REQUIRED IMMUNIZATIONS OF CHILDREN 18 YEARS OF AGE OR OLDER.

MEASLES, MUMPS, AND RUBELLA - 1 DOSE REQUIRED

MMR COMBINED - 1 DOSE AT 12 MONTHS OF AGE OR OLDER AND IN 1968 OR LATER (RECOMMENDED AT 15 MONTHS)

-OR-

MEASLES SINGLE - 1 DOSE AT 12 MONTHS OF AGE OR OLDER AND IN 1968 OR LATER (RECOMMENDED AT 15 MONTHS)

MUMPS SINGLE - 1 DOSE AT 12 MONTHS OF AGE OR OLDER

RUBELLA SINGLE - 1 DOSE AT 12 MONTHS OF AGE OR OLDER

THE CHILDREN'S

ALL APPROPRIATE DOSES AND DATES INCLUDING BIRTHDATE MUST BE ENTERED, AND THE CERTIFICATE SIGNED BELOW BY A PHYSICIAN OR AUTHORIZED PERSON AND [Redacted] FOR THE CHILD TO ATTEND SCHOOL.

[Redacted] M.D.

I HAVE REVIEWED [Redacted] RECORDS AVAILABLE AND TO THE BEST OF MY KNOWLEDGE THE ABOVE NAMED CHILD HAS BEEN ADEQUATELY IMMUNIZED AGAINST DIPHTHERIA, TETANUS, PERTUSSIS, POLIO, MEASLES, MUMPS, AND RUBELLA AS REQUIRED BY FLORIDA LAW FOR SCHOOL ATTENDANCE.

SUNRISE, FL 33411
SUITE 201
ROYAL PALM BEACH, FL 33411
PHONE [Redacted]

PHYSICIAN OR CLINIC NAME (PLEASE PRINT)

[Redacted]

PHYSICIAN OR AUTHORIZED SIGNATURE

7.20.92
DATE

STATE OF FLORIDA
DEPARTMENT OF HEALTH & REHABILITATIVE SERVICES
STUDENT HEALTH EXAMINATIONS

Date 7-20-92
Race W Sex F

Phone _____ Age _____
Birthdate _____

School _____

EXAMINATION

Height _____

COMMENT: Abnormal Findings, by number

normal=A	N	A
	<input checked="" type="checkbox"/>	
Use	<input type="checkbox"/>	
Head/Scalp	<input type="checkbox"/>	
4. Eyes	<input type="checkbox"/>	
5. Visual Acuity (R&L) <u>20/30 R/L</u>	<input type="checkbox"/>	
6. Ears	<input type="checkbox"/>	
7. Auditory Acuity (R & L) <u>auditory</u>	<input checked="" type="checkbox"/>	
8. Nose / Throat	<input type="checkbox"/>	
9. Mouth, Teeth and Gums	<input type="checkbox"/>	
10. Chest / Lungs	<input type="checkbox"/>	
11. Heart	<input type="checkbox"/>	
12. Abdomen	<input type="checkbox"/>	
13. Genitals and Anus	<input type="checkbox"/>	
14. Musculo-Skeletal	<input type="checkbox"/>	
15. Neurological	<input type="checkbox"/>	
16. Alertness	<input type="checkbox"/>	
17. Emotional / Mental/ Behavior Prob.)	<input type="checkbox"/>	
18. Handicap, physical/ other (Specify)	<input type="checkbox"/>	
19. Activity Restrictions (Specify)	<input type="checkbox"/>	
20. Abuse, substance/ physical / emotional	<input type="checkbox"/>	
21. Nutrition	<input type="checkbox"/>	
22. Other	<input type="checkbox"/>	

B. HEALTH HISTORY (Serious Illnesses Injuries: explain)

(attach narrative if additional space needed)

C. LABORATORY

Hemoglobin/Hematocrit _____

Stool (O & P) _____

Tuberculin test: _____

Lead _____

Sickle Cell _____

NAME: _____

TITLE: _____

ADDRESS: _____

(Please Print) PALM BEACH BLVD.
SUITE 201
ROYAL PALM BEACH, FL 33411

7-20-92

Date

HRS-H Fo _____ (Obsoletes previous editions)

(Stock Number: 5744-000-3040-2)

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
CUMULATIVE SCHOOL HEALTH RECORD
 (This form is not intended for physician's use)

Special Health Problems - See Narrative _____

Name [REDACTED] Race W Sex F School [REDACTED]
 Address [REDACTED] Father's Name [REDACTED] Jr.
[REDACTED] Mother's Name [REDACTED]

Date of Birth [REDACTED] / [REDACTED] / [REDACTED] Place of Birth West Palm Beach, FL Birth Recorded: Yes No

Immunization Certification: Yes No

Special Immunization Programs _____

A NARRATIVE NOTE IS REQUIRED FOR REFERRAL AND OUTCOME ENTRIES

Screening and Assessment Grades K-3	K			1			2			3		
	Screening Date	Referral	Outcome									
Vision												
Hearing												
Height, Weight & Graphing												
Nutrition												
Dental Health												
Mental Health												
Communicable Disease												
Records Review												
Physical Assessment												
Other												
Other												

Screening and Assessment Grades 4-8	4			5			6			7			8		
	Screening Date	Referral	Outcome												
Vision															
Hearing															
Height, Weight & Graphing															
Nutrition															
Dental Health															
Mental Health															
Communicable Disease															
Records Review															
Physical Assessment															
Scoliosis															
Other															
Other															



STUDENT HEALTH EXAMINATIONS

Date 7/6/98

Student's Full Name [Redacted] Phone _____ Age _____ Race _____ Sex _____

Address _____ Birthdate _____

Name of Parent or Guardian _____ School _____

A. HEALTH EXAMINATION

Height [Redacted] Pressure _____

(✓) Normal=N; Abnormal=A	N	A
1. Appearance	✓	
2. Skin/Nose	✓	
3. Head/Scalp	✓	
4. Eyes	✓	
5. Visual Acuity (R & L)	✓	
6. Ears	✓	
7. Auditory Acuity (R & L)	✓	
8. Nose / Throat	✓	
9. Mouth, Teeth and Gums	✓	
10. Chest / Lungs	✓	
11. Heart	✓	
12. Abdomen	✓	
13. Genitals and Anus	✓	
14. Musculo-Skeletal	✓	
15. Neurological	✓	
16. Alertness	✓	
17. Emotional / Mental/ Behavior Prob)	✓	
18. Handicap, physical/ other (Specify)	✓	
19. Activity Restrictions (Specify)	✓	
20. Abuse, substance/ physical / emotional	✓	
21. Nutrition	✓	
22. Other	✓	

COMMENT: Abnormal Findings, by number



B. HEALTH HISTORY (Serious Illnesses Injuries: explain) None

(attach narrative if additional space needed)

C. LABORATORY (as indicated)

Hemoglobin/Hematocrit _____ Stool (O & P) _____ Tuberculin test: _____
Lead _____ Sickle Cell _____

NAME: _____

TITLE: _____

ADDRESS: _____

(Please Print)

Authorized Signature

Date

7/6/99

STATE OF FLORIDA
 DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
 CUMULATIVE SCHOOL HEALTH RECORD
 (This form is not intended for physician's use)

Special Health Problems - See Narrative _____

Name [REDACTED] Race W Sex F School Crestwood Middle

Address [REDACTED] Father's Name [REDACTED]

[REDACTED] Mother's Name [REDACTED]

Date of Birth / / Place of Birth West Palm Beach, FL Birth Recorded: Yes No

Immunization Certification: Yes No

Special Immunization Programs _____

A NARRATIVE NOTE IS REQUIRED FOR REFERRAL AND OUTCOME ENTRIES

Screening and Assessment Grades K-3	K			1			2			3		
	Screening Date	Referral	Outcome									
Vision												
Hearing												
Height, Weight & Graphing												
Nutrition												
Dental Health												
Mental Health												
Communicable Disease												
Records Review												
Physical Assessment												
Other												
Other												

Screening and Assessment Grades 4-8	4			5			6			7			8		
	Screening Date	Referral	Outcome												



9-12 Academic Improvement Plan (AIP)

SY: 04

SCH: [REDACTED] GR: [REDACTED]
 DOB: [REDACTED] ABS: 3 RET: [REDACTED]
 FNRT: READ: [REDACTED] MATH: [REDACTED]
 FCAT: READ: [REDACTED] MATH: [REDACTED]
 WAP: 4.0 AIP - R-FZ W-ZZ M-ZZ S-FZ
 PRIM: LEP: 504:

Marking Period Monitoring Dates:

First 10/21/03 Second 1/1
 Third 1/1 Fourth 1/1

	<input checked="" type="checkbox"/> READING	<input type="checkbox"/> WRITING	<input type="checkbox"/> MATHEMATICS	<input type="checkbox"/> SCIENCE
DIAGNOSTIC ASSESSMENTS	<input checked="" type="checkbox"/> Textbook Assessments <input checked="" type="checkbox"/> EDL <input checked="" type="checkbox"/> FCAT Diagnostic / Practice Tests <input checked="" type="checkbox"/> Diagnostic Software <input type="checkbox"/> Other (see attached)	<input type="checkbox"/> Palm Beach Writes <input type="checkbox"/> Portfolio <input type="checkbox"/> Performance Assessments <input type="checkbox"/> FCAT Diagnostic/Practice Tests <input type="checkbox"/> Diagnostic Software <input type="checkbox"/> Other (see attached)	<input type="checkbox"/> Textbook Assessments <input type="checkbox"/> Portfolio <input type="checkbox"/> Performance Assessments <input type="checkbox"/> FCAT Diagnostic/Practice Tests <input type="checkbox"/> Diagnostic Software <input type="checkbox"/> Other (see attached)	<input type="checkbox"/> Textbook Assessments <input type="checkbox"/> Portfolio <input checked="" type="checkbox"/> Performance Assessments <input type="checkbox"/> FCAT Diagnostic/Practice Tests <input type="checkbox"/> Diagnostic Software <input type="checkbox"/> Other (see attached)
FOCUS OF REMEDIATION	<input type="checkbox"/> Phonemic Awareness <input checked="" type="checkbox"/> Letter Recognition <input checked="" type="checkbox"/> Phonics: Sound / Symbol Correspondence Decoding/Encoding <input checked="" type="checkbox"/> Meaning <input type="checkbox"/> Structure <input checked="" type="checkbox"/> Visual (Phonics) Fluency <input checked="" type="checkbox"/> High Frequency Words <input type="checkbox"/> Rate Meaning <input checked="" type="checkbox"/> Vocabulary <input checked="" type="checkbox"/> Text Comprehension	Types of Writing <input type="checkbox"/> Word/Sentence writing <input type="checkbox"/> Paragraph Writing <input type="checkbox"/> Composition Writing Awareness /Application of FCAT Writing Rubric <input type="checkbox"/> Focus <input type="checkbox"/> Support <input type="checkbox"/> Organization <input type="checkbox"/> Conventions Compositions <input type="checkbox"/> Narrative <input type="checkbox"/> Expository <input type="checkbox"/> Persuasive	<input type="checkbox"/> Number Sense, Concepts and Operations <input type="checkbox"/> Measurement <input type="checkbox"/> Geometry <input type="checkbox"/> Algebraic Thinking <input type="checkbox"/> Data Analysis and Probability <input type="checkbox"/> Reading in Content Area Specific Concepts _____ _____ _____ _____	<input checked="" type="checkbox"/> The Nature of Matter <input type="checkbox"/> Energy <input type="checkbox"/> Force and Motion <input type="checkbox"/> Processes that Shape the Earth <input type="checkbox"/> Earth and Space <input checked="" type="checkbox"/> Processes of Life <input checked="" type="checkbox"/> How Living Things Interact with their Environment <input type="checkbox"/> The Nature of Science concepts <input checked="" type="checkbox"/> Reading in Content Area Specific Concepts _____ _____ _____
DESIRED LEVELS OF PERFORMANCE				
CONTENT AREA INTERVENTION STRATEGIES				
INSTRUCTIONAL DELIVERY INTERVENTION STRATEGIES	Tutoring <input checked="" type="checkbox"/> During School Day <input type="checkbox"/> After/Before School / Saturday Instructional Alternatives <input type="checkbox"/> Temporary Skill Groups <input type="checkbox"/> Cooperative Learning Groups <input checked="" type="checkbox"/> Guided Reading/Writing Groups <input checked="" type="checkbox"/> Technology <input type="checkbox"/> Other (see attached) Assignment Alternative <input type="checkbox"/> Time <input type="checkbox"/> Quantity <input type="checkbox"/> Product Requirements <input type="checkbox"/> Child Study Referrals <input checked="" type="checkbox"/> Instructional Reading	Tutoring <input type="checkbox"/> During School Day <input type="checkbox"/> After/Before School / Saturday Instructional Alternatives <input type="checkbox"/> Temporary Skill Groups <input type="checkbox"/> Cooperative Learning Groups <input type="checkbox"/> Guided Reading/Writing Groups <input type="checkbox"/> Technology <input type="checkbox"/> Other (see attached) Assignment Alternative <input type="checkbox"/> Time <input type="checkbox"/> Quantity <input type="checkbox"/> Product Requirements <input type="checkbox"/> Child Study Referrals <input type="checkbox"/> Instructional Language Arts	Tutoring <input type="checkbox"/> During School Day <input type="checkbox"/> After/Before School / Saturday Instructional Alternatives <input type="checkbox"/> Temporary Skill Groups <input type="checkbox"/> Cooperative Learning Groups <input type="checkbox"/> Technology <input type="checkbox"/> Other (see attached) Assignment Alternative <input type="checkbox"/> Time <input type="checkbox"/> Quantity <input type="checkbox"/> Product Requirements <input type="checkbox"/> Child Study Referrals <input type="checkbox"/> Instructional Mathematics	Tutoring <input type="checkbox"/> During School Day <input checked="" type="checkbox"/> After/Before School / Saturday Instructional Alternatives <input type="checkbox"/> Temporary Skill Groups <input type="checkbox"/> Cooperative Learning Groups <input type="checkbox"/> Guided Reading/Writing Groups <input type="checkbox"/> Technology <input type="checkbox"/> Other (see attached) Assignment Alternative <input type="checkbox"/> Time <input type="checkbox"/> Quantity <input type="checkbox"/> Product Requirements <input type="checkbox"/> Child Study Referrals <input type="checkbox"/> Instructional Reading
Student progress will be monitored throughout the school year, and student progress will be reflected on the report card.				
END-OF-YEAR REVIEW	<input type="checkbox"/> Successfully Remediated <input type="checkbox"/> Requires New AIP Next School Year <input type="checkbox"/> Special Services / Placement <input type="checkbox"/> Other (see attached)	<input type="checkbox"/> Successfully Remediated <input type="checkbox"/> Requires New AIP Next School Year <input type="checkbox"/> Special Services / Placement <input type="checkbox"/> Other (see attached)	<input type="checkbox"/> Successfully Remediated <input type="checkbox"/> Requires New AIP Next School Year <input type="checkbox"/> Special Services / Placement <input type="checkbox"/> Other (see attached)	<input type="checkbox"/> Successfully Remediated <input type="checkbox"/> Requires New AIP Next School Year <input type="checkbox"/> Special Services / Placement <input type="checkbox"/> Other (see attached)

Deficiencies due to non-attendance (refer to Attendance Specialist)

Number of Days Absent _____

Parent/Guardian Contact Commitment/Contribution Check all that apply.

<input type="checkbox"/> Monitor Attendance / Tardies	<input type="checkbox"/> Check Homework
<input type="checkbox"/> Read with Child Every Night	<input type="checkbox"/> Reinforce Skills
<input type="checkbox"/> Attend Parent Conferences	<input type="checkbox"/> Sign Daily/Weekly Notes
<input type="checkbox"/> Attend Parent Curriculum/ Information Meetings	

SIGNATURE OF PARENT / GUARDIAN _____ DATE _____

 SIGNATURE OF _____ DATE 5/4/04

 SIGNATURE OF _____ DATE 10/2/03

(31) STUDENT LIVES WITH (CHECK ONE)
 BOTH PARENTS MOTHER FATHER SHARED CUSTODY OTHER

(32) TRANSPORTED BY: Student will be transported to/from school by (name if other than parent)
 (33) IS THERE A COURT ORDER BARRING EITHER PARENT FROM REMOVING OR CONTACTING THE STUDENT DURING THE SCHOOL DAY? YES NO
IF YES, PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE COURT ORDER.

(34) FATHER/GUARDIAN: DOES FATHER HAVE CUSTODY? YES NO
YES
 (35) MOTHER/GUARDIAN: DOES MOTHER HAVE CUSTODY? YES NO
YES

FIRST NAME MIDDLE LAST
 [REDACTED] ROYAL PALM BEACH FL 33411
 HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION
 PLACE OF EMPLOYMENT
 [REDACTED]

HOME PHONE BUSINESS PHONE
 (36) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATE)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(37) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATE)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(38) LEGAL GUARDIAN (IF ANY) DOES LEGAL GUARDIAN HAVE CUSTODY? YES NO
 SAME AS ABOVE
 FIRST NAME MIDDLE LAST HOME ADDRESS CITY STATE ZIP CODE
 OCCUPATION PLACE OF EMPLOYMENT BUSINESS PHONE

EMERGENCY HEALTH AND SAFETY INFORMATION

PART I: PERSON(S) OTHER THAN PARENT AUTHORIZED TO PICK UP STUDENT			(39) PASSWORD: (LIMIT 10 CHARACTERS)	(40) AUTHORIZED FOR EMERGENCY PICKUP
(41) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(42) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(43) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(44) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(45) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO

(46) PART II: IF SCHOOL PERSONNEL ARE UNABLE TO CONTACT YOU IN CASE OF ILLNESS OR ACCIDENT, MAY WE HAVE YOUR PERMISSION TO CALL YOUR DOCTOR OR EMERGENCY SERVICES (911) FOR TRANSPORT TO THE HOSPITAL? YES NO

(47) FAMILY DOCTOR (48) PHONE NUMBER (49) HOSPITAL PREFERENCE

(50) LIST YOUR CHILD'S ILLNESSES, ALLERGIES OR OTHER PHYSICAL LIMITATIONS:

YOUR CHILDREN IN OTHER PALM BEACH COUNTY SCHOOLS:

(51) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(52) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(53) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(54) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(55) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE

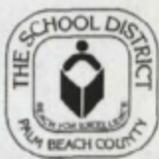
(56) I VERIFY THAT THE INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.
 SIGNATURE OF PARENT OR LEGAL GUARDIAN _____ DATE _____

FOR OFFICE USE ONLY:

(57) SCHOOL NO. 1691	(58) STUDENT NUMBER [REDACTED]	(59) STUDENT LANGUAGE EN	(60) COB US	(61) ENTRY CODE E01	(62) ENTRY DATE 08/19/98	(63) SAC CODE 106D
		(64) PARENT/GUARDIAN LANGUAGE EN		(65) GRADE LEVEL 06	(66) CALENDAR 01	(67) TEACHER NO.

(68) REASSIGNMENT CODE A-ADM E-ESE B-ESOL M-MAG
 (69) TRANSPORTATION YES NO
 (70) VERIFICATION OF BIRTH 1 Z
 (71) IRRS 1 Z
 (72) DOCUMENTATION CHECKLIST (CHECK AND DATE WHEN RECEIVED)
 IMMUNIZATIONS DATE _____ VERIFICATION OF BIRTH RECORDS DATE _____
 SOCIAL SECURITY NO. (OPTIONAL) DATE _____ PHYSICAL EXAMS DATE _____

(73) DATA ENTRY COMPLETED BY: _____ DATE: _____



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY

NEW/RETURNING STUDENTS REGISTRATION

DISTR: 1691 TCHR: [REDACTED] TNBR: 021STDT: [REDACTED]
8/05/98

STUDENT NUMBER:

VERIFICATION FOR NEW/RETURNING STUDENTS: TO THE PARENTS OR GUARDIANS:

NEW STUDENTS: Complete all non-shaded areas on both sides of form
RETURNING STUDENTS: Please review both sides for correctness of typed information. If the information printed is incorrect, please correct it by carefully and lightly crossing out the incorrect information and writing the correct information above it.

RUN DATE: 08/05/98 CRS: 1001010 SEC: 04 BLDG: 00 RM: P17

(1) STUDENT'S LEGAL NAME LAST: [REDACTED] FIRST: [REDACTED] MIDDLE: [REDACTED]		(2) ALSO KNOWN AS
---	--	-------------------

(3) LOCAL ADDRESS HOUSE NO.: [REDACTED] STREET NAME: [REDACTED] APT. NO.: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP CODE: [REDACTED]		(4) MAILING ADDRESS HOUSE NO.: [REDACTED] STREET NAME: [REDACTED] APT. NO.: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP CODE: [REDACTED]	
--	--	--	--

(5) STUDENT'S SOCIAL SECURITY NO. (OPTIONAL) [REDACTED]	(6) HOME PHONE NO. [REDACTED]	(7) SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	(8) RACE <input type="checkbox"/> I AMERICAN INDIAN OR ALASKAN NATIVE <input type="checkbox"/> B BLACK NON-HISPANIC <input type="checkbox"/> A ASIAN OR PACIFIC ISLANDER <input type="checkbox"/> H HISPANIC <input type="checkbox"/> W WHITE NON-HISPANIC <input type="checkbox"/> M MULTIRACIAL
--	----------------------------------	---	---

(9) DATE OF BIRTH MONTH: [REDACTED] YEAR: [REDACTED]	(10) PLACE OF BIRTH WEST PALM BEACH FL US STATE FLORIDA COUNTRY
---	--

(11) RESIDENT STATUS <input type="checkbox"/> 0. FOREIGN EXCHANGE STUDENT <input type="checkbox"/> 1. OUT-OF-COUNTY RESIDENT <input checked="" type="checkbox"/> 3. IN-COUNTY RESIDENT <input type="checkbox"/> 2. OUT-OF-STATE RESIDENT	(12) ENTRY DATE INTO USA
--	--------------------------

(13) FEDERAL IMPACT AID SURVEY

YES NO A. THE STUDENT RESIDES ON FEDERAL PROPERTY.

YES NO B. THE STUDENT RESIDES IN LOW RENT HOUSING.

YES NO C. THE PARENT IS EMPLOYED ON FEDERAL PROPERTY LOCATED IN PALM BEACH COUNTY.

YES NO D. THE PARENT IS EMPLOYED ON LOW RENT HOUSING LOCATED IN PALM BEACH COUNTY.

YES NO E. THE PARENT IS IN THE UNIFORMED SERVICES OF THE UNITED STATES.

IF YES, IS THE PARENT ON ACTIVE DUTY? YES NO

AIR FORCE ARMY COAST GUARD MARINES NATIONAL GUARD NAVY

(14) HAS THIS CHILD BEEN ENROLLED IN ANY PRESCHOOL? YES (PLEASE PLACE A CHECKMARK (✓) BY EACH PROGRAM ATTENDED. ALSO, INDICATE WITH AN ASTERISK (*) THE PROGRAM YOUR CHILD WAS IN THE LONGEST.)

C. CHAPTER 1 H. HEADSTART O. OTHER

D. PRE-K DISABILITIES M. MIGRANT PRE-K S. SUBSIDIZED CHILD CARE

E. PRE-K EARLY INTERVENTION N. NON-SUBSIDIZED CHILD CARE

(15) IS THE STUDENT A SINGLE PARENT? NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	(16) CURRENT GRADE LEVEL 06
--	--------------------------------

TRANSFER INFORMATION:

(17) NAME OF SCHOOL TRANSFERRING FROM	(18) CITY OR LOCATION	(19) DATE OF LAST ATTENDANCE
(20) GRADE LEVEL	(21) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(22) DATE ATTENDED

FREE OR REDUCED PRICE LUNCH AND HEALTH INFORMATION:

(23) HAVE YOU FILLED OUT AN APPLICATION FOR FREE OR REDUCED LUNCH? (APPLICATION IS PROVIDED WITH THIS REGISTRATION FORM) YES NO

(24) HEALTH SCREENINGS:
I GIVE PERMISSION FOR MY CHILD TO BE GIVEN HEALTH SCREENINGS. THESE TESTS MAY BE GIVEN INDIVIDUALLY OR IN GROUPS. YES YES NO

(25) SODIUM FLUORIDE:
I GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SODIUM FLUORIDE PROGRAM TO PREVENT DENTAL DECAY. PERMISSION IS VALID THROUGH GRADE SIX. YES YES NO

NEW STUDENTS TO PALM BEACH COUNTY: HOME LANGUAGE SURVEY

(26) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE PARENT or GUARDIAN:	(27) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE STUDENT?	(28) DATE OF ENTRY INTO THE ESOL PROGRAM
---	--	--

(29) LANGUAGE SURVEY 1. IS A LANGUAGE OTHER THAN ENGLISH USED IN THE HOME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 2. DOES THE STUDENT HAVE A FIRST LANGUAGE OTHER THAN ENGLISH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 3. DOES THE STUDENT MOST FREQUENTLY SPEAK A LANGUAGE OTHER THAN ENGLISH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	(30) DISCLOSURES for first entry into this SCHOOL DISTRICT HAS THE STUDENT EVER: 1. BEEN EXPELLED FROM SCHOOL? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 2. HAD AN ARREST RESULTING IN A CHARGE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 3. HAD ANY JUVENILE JUSTICE ACTIONS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
--	---



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY

NEW/RETURNING STUDENTS REGISTRATION

DISTR: 1691 TCHR: [REDACTED]
08/05/99

TNBR: 055STDT: [REDACTED]

STUDENT NUMBER:

VERIFICATION FOR NEW/RETURNING STUDENTS: TO THE PARENTS OR GUARDIANS:

NEW STUDENTS: Complete all non-shaded areas on both sides of form
RETURNING STUDENTS: Please review both sides for correctness of typed information. If the information printed is incorrect, please correct it by carefully and lightly crossing out the incorrect information and writing the correct information above it.

RUN DATE: 08/05/99 CRS: 1001040 SEC: 04 BLDG: 00 RM: P4

(1) STUDENT'S LEGAL NAME LAST: [REDACTED] FIRST: [REDACTED] MIDDLE: [REDACTED]			(2) ALSO KNOWN AS		
(3) LOCAL ADDRESS HOUSE NO. [REDACTED] STREET NAME [REDACTED] APT. NO. [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]			(4) MAILING ADDRESS HOUSE NO. [REDACTED] STREET NAME [REDACTED] APT. NO. [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]		
(5) STUDENT'S SOCIAL SECURITY NO. (OPTIONAL) [REDACTED]	(6) HOME PHONE NO. [REDACTED]	(7) SEX <input type="checkbox"/> F FEMALE <input type="checkbox"/> M MALE	(8) RACE <input type="checkbox"/> I AMERICAN INDIAN OR ALASKAN NATIVE <input type="checkbox"/> B BLACK NON-HISPANIC <input type="checkbox"/> A ASIAN OR PACIFIC ISLANDER <input type="checkbox"/> H HISPANIC <input type="checkbox"/> W WHITE NON-HISPANIC <input type="checkbox"/> M MULTIRACIAL		
(9) DATE OF BIRTH MONTH [REDACTED] YEAR [REDACTED]		(10) PLACE OF BIRTH WEST PALM BEACH FL US STATE FLORIDA COUNTRY			

(11) RESIDENT STATUS <input type="checkbox"/> 0. FOREIGN EXCHANGE STUDENT <input type="checkbox"/> 1. OUT-OF-COUNTY RESIDENT <input checked="" type="checkbox"/> 2. OUT-OF-STATE RESIDENT <input type="checkbox"/> 3. IN-COUNTY RESIDENT		(12) ENTRY DATE INTO USA
--	--	--------------------------

(13) FEDERAL IMPACT AID SURVEY

YES NO A. THE STUDENT RESIDES ON FEDERAL PROPERTY.

YES NO B. THE STUDENT RESIDES IN LOW RENT HOUSING.

YES NO C. THE PARENT IS EMPLOYED ON FEDERAL PROPERTY LOCATED IN PALM BEACH COUNTY.

YES NO D. THE PARENT IS EMPLOYED ON LOW RENT HOUSING LOCATED IN PALM BEACH COUNTY.

YES NO E. THE PARENT IS IN THE UNIFORMED SERVICES OF THE UNITED STATES.

IF YES, IS THE PARENT ON ACTIVE DUTY? YES NO

AIR FORCE ARMY COAST GUARD MARINES NATIONAL GUARD NAVY

(14) HAS THIS CHILD BEEN ENROLLED IN ANY PRESCHOOL? **no** (PLEASE PLACE A CHECKMARK (✓) BY EACH PROGRAM ATTENDED. ALSO, INDICATE WITH AN ASTERISK (*) THE PROGRAM YOUR CHILD WAS IN THE LONGEST.)

C. CHAPTER 1 H. HEADSTART O. OTHER

D. PRE-K DISABILITIES M. MIGRANT PRE-K S. SUBSIDIZED CHILD CARE

E. PRE-K EARLY INTERVENTION N. NON-SUBSIDIZED CHILD CARE

(15) IS THE STUDENT A SINGLE PARENT? **NO** YES NO

(16) CURRENT GRADE LEVEL **07**

TRANSFER INFORMATION:

(17) NAME OF SCHOOL TRANSFERRING FROM	(18) CITY OR LOCATION	(19) DATE OF LAST ATTENDANCE
(20) GRADE LEVEL	(21) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(22) DATE ATTENDED

FREE OR REDUCED PRICE LUNCH AND HEALTH INFORMATION:

(23) HAVE YOU FILLED OUT AN APPLICATION FOR FREE OR REDUCED LUNCH? (APPLICATION IS PROVIDED WITH THIS REGISTRATION FORM) YES NO

(24) HEALTH SCREENINGS:
I GIVE PERMISSION FOR MY CHILD TO BE GIVEN HEALTH SCREENINGS. THESE TESTS MAY BE GIVEN INDIVIDUALLY OR IN GROUPS. **YES** YES NO

(25) SODIUM FLUORIDE:
I GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SODIUM FLUORIDE PROGRAM TO PREVENT DENTAL DECAY. PERMISSION IS VALID THROUGH GRADE SIX. **YES** YES NO

NEW STUDENTS TO PALM BEACH COUNTY: HOME LANGUAGE SURVEY

(26) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE PARENT or GUARDIAN: English spanish	(27) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE STUDENT? English	(28) DATE OF ENTRY INTO THE ESOL PROGRAM
---	--	--

(29) LANGUAGE SURVEY

1. IS A LANGUAGE OTHER THAN ENGLISH USED IN THE HOME? YES NO

2. DOES THE STUDENT HAVE A FIRST LANGUAGE OTHER THAN ENGLISH? YES NO

3. DOES THE STUDENT MOST FREQUENTLY SPEAK A LANGUAGE OTHER THAN ENGLISH? YES NO

(30) DISCLOSURES for first entry into this SCHOOL DISTRICT

HAS THE STUDENT EVER:

1. BEEN EXPELLED FROM SCHOOL? YES NO

2. HAD AN ARREST RESULTING IN A CHARGE? YES NO

3. HAD ANY JUVENILE JUSTICE ACTIONS? YES NO

STUDENT LIVES WITH (CHECK ONE)

BOTH PARENTS MOTHER FATHER SHARED CUSTODY OTHER

(32) TRANSPORTED BY: Student will be transported to/from school by (name if other than parent)

(33) IS THERE A COURT ORDER BARRING EITHER PARENT FROM REMOVING OR CONTACTING THE STUDENT DURING THE SCHOOL DAY? YES NO
 IF YES, PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE COURT ORDER.

(34) FATHER/GUARDIAN DOES FATHER HAVE CUSTODY? YES NO

(35) MOTHER/GUARDIAN DOES MOTHER HAVE CUSTODY? YES NO

FIRST NAME MIDDLE LAST

FIRST NAME MIDDLE LAST

ROYAL PALM BEACH FL 33411

ROYAL PALM BEACH FL 33411

HOME ADDRESS CITY STATE ZIP CODE

HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION

OCCUPATION

PLACE OF EMPLOYMENT

PLACE OF EMPLOYMENT

HOME PHONE BUSINESS PHONE

HOME PHONE BUSINESS PHONE

(36) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)

A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL GRADUATE
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(37) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)

A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL GRADUATE
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(38) LEGAL GUARDIAN (IF ANY) *Parents* DOES LEGAL GUARDIAN HAVE CUSTODY? YES NO

FIRST NAME MIDDLE LAST HOME ADDRESS CITY STATE ZIP CODE

EMERGENCY HEALTH AND SAFETY INFORMATION

PART I: PERSON(S) OTHER THAN PARENT AUTHORIZED TO PICK UP STUDENT			(39) PASSWORD: (LIMIT 10 CHARACTERS)	(40) AUTHORIZED FOR EMERGENCY PICKUP
(41) NAME	ADDRESS	PHONE	RELATIONSHIP	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(42) NAME	ADDRESS	PHONE	RELATIONSHIP	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
(43) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(44) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(45) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO

(46) PART II: IF SCHOOL PERSONNEL ARE UNABLE TO CONTACT YOU IN CASE OF ILLNESS OR ACCIDENT, MAY WE HAVE YOUR PERMISSION TO CALL YOUR DOCTOR OR EMERGENCY SERVICES (911) FOR TRANSPORT TO THE HOSPITAL? YES NO

(47) FAMILY DOCTOR (48) PHONE NUMBER (49) HOSPITAL PREFERENCE

(50) LIST YOUR CHILD'S ILLNESSES, ALLERGIES OR OTHER PHYSICAL LIMITATIONS:

YOUR CHILDREN IN OTHER PALM BEACH COUNTY SCHOOLS:

(51) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(52) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(53) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(54) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(55) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE

(56) I VERIFY THAT THE INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

FOR OFFICE USE ONLY:

(57) SCHOOL NO.	(58) STUDENT NUMBER	(59) STUDENT LANGUAGE	(60) COB	(61) ENTRY CODE	(62) ENTRY DATE	(63) SAC CODE
1691		EN	US	E01	08/16/99	106D
(64) PARENT/GUARDIAN LANGUAGE	(65) GRADE LEVEL	(66) CALENDAR	(67) TEACHER NO.			
EN	07	01				
(68) REASSIGNMENT CODE	(69) TRANSPORTATION	(70) VERIFICATION OF BIRTH	(71) HRS	(72) DOCUMENTATION CHECKLIST (CHECK AND DATE WHEN RECEIVED)		
<input type="checkbox"/> A-ADM <input type="checkbox"/> E-ESE	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	1 Z	A B C	IMMUNIZATIONS <input type="checkbox"/> DATE	VERIFICATION OF BIRTH RECORDS <input type="checkbox"/> DATE	PHYSICAL EXAMS <input type="checkbox"/> DATE
<input type="checkbox"/> B-ESOL <input type="checkbox"/> M-MAG	0 1 2 3 4 5 6	1 3 4 5 6 7 8 9 T		SOCIAL SECURITY NO. (OPTIONAL) <input type="checkbox"/> DATE		

(73) DATA ENTRY COMPLETED BY: DATE:

STUDENT NAME: _____
 Legal _____

SEX: **F**
 RACIAL/ETHNIC GROUP:
 White, Not Hispanic
 Black, Not Hispanic
 Hispanic
 American Indian/Native Alaskan
 Asian/Pacific Islander

STUDENT NUMBER: _____
 PHONE NUMBER: (optional) _____

BIRTHDATE: _____
 Verified by Birth Certificate: Yes
 If Not, What Type Verification? _____

ADDRESS: (use pencil in this space, until final.)

BIRTHPLACE: _____

NAME OF PARENT(S) OR LEGAL GUARDIAN OR OTHER RESPONSIBLE ADULT AT HOME: _____

P G OA

CURRENT SCHOOL: (use pencil in this space, until final.)
 Name _____
 Street _____
 City _____

Date First Entered This District: _____

Withdrawal Date: _____

FLORIDA PERMANENT RECORD CARD
 CATEGORY A - Education Records
 GRADES K-5

School:	Grade:	School:	Grade:	School:	Grade:	School:	Grade:	School:	Grade:		
_____	K	_____	1	_____	2	_____	3	_____	4		
School Year: 19- <u>92</u> -19 <u>93</u>		School Year: 19 <u>93</u> -19 <u>94</u>		School Year: 19 <u>94</u> -19 <u>95</u>		School Year: 19 <u>95</u> -19 <u>96</u>		School Year: 19 <u>96</u> -19 <u>97</u>			
Days Present: <u>171</u>	Days Absent: <u>9</u>	Days Present: <u>176</u>	Days Absent: <u>4</u>	Days Present: <u>172</u>	Days Absent: <u>8</u>	Days Present: <u>172</u>	Days Absent: <u>8</u>	Days Present: <u>179</u>	Days Absent: <u>1</u>		
Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark
MATHEMATICS			MATHEMATICS			MATHEMATICS			MATHEMATICS		
READING			READING			READING			READING		
LANGUAGE			LANGUAGE			LANGUAGE			LANGUAGE		
SPELLING			SPELLING			SPELLING			SPELLING		
HANDWRITING			HANDWRITING			HANDWRITING			HANDWRITING		
SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES		
SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH		
BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE		
Indicate: Promote (P)	<u>P</u>		Indicate: Promote (P)			Indicate: Promote (P)			Indicate: Promote (P)		
Retain (R)			Retain (R)	<u>SS</u>		Retain (R)			Retain (R)		
Summer School (SS)			Summer School (SS)			Summer School (SS)			Summer School (SS)		
School:	Grade:	School:	Grade:	School:	Grade:	School:	Grade:	School:	Grade:		
_____	<u>5</u>	_____	_____	_____	_____	_____	_____	_____	_____		
School Year: 19- <u>97</u> -19 <u>98</u>		School Year: 19 _____ -19 _____									
Days Present: <u>178</u>	Days Absent: <u>2</u>	Days Present:	Days Absent:								
Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark
MATHEMATICS			MATHEMATICS			MATHEMATICS			MATHEMATICS		
READING			READING			READING			READING		
LANGUAGE			LANGUAGE			LANGUAGE			LANGUAGE		
SPELLING			SPELLING			SPELLING			SPELLING		
HANDWRITING			HANDWRITING			HANDWRITING			HANDWRITING		
SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES		
SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH		
BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE		
Indicate: Promote (P)			Indicate: Promote (P)			Indicate: Promote (P)			Indicate: Promote (P)		
Retain (R)			Retain (R)			Retain (R)			Retain (R)		
Summer School (SS)			Summer School (SS)			Summer School (SS)			Summer School (SS)		

PBSD0932

01-9340



THE SCHOOL DISTRICT OF PALM BEACH COUNTY ELEMENTARY REPORT CARD

Grade 5

Year 1997-1998

Student _____
Teacher _____

School _____

Principal _____

MARKING CODES - ACADEMIC SUBJECTS GRADES 1 and 2

E - Excellent S - Satisfactory
V - Very Satisfactory N - Needs Improvement

GRADES 3-5

A - Outstanding (94% - 100%)
B - Above Average (85% - 93%)
C - Average (75% - 84%)
D - Below Average (65% - 74%)
F - Failing (0% - 64%)
I - Incomplete

SOCIAL DEVELOPMENT/CLASSROOM STUDY HABITS

Please work on the area(s) that have a check (✓).

	Marking Period		
	1st	2nd	3rd
Overall effort			
Works cooperatively			
Works independently			
Completes classwork on time			
Completes homework on time			
Follows classroom rules and routines			
Uses time wisely			
Follows directions			
Accepts responsibility for own actions			
Comes to class prepared with materials			

ACADEMIC SUBJECTS

	Marking Period			
	1st	2nd	3rd	4th
Mathematics <i>(Indicate level with a check)</i>				
<i>On or above grade level</i>				
<i>Below grade level</i>				
Reading <i>(Indicate level with a check)</i>				
<i>On or above grade level</i>				
<i>Below grade level</i>				
Composition				
Language				
Spelling				
Handwriting/Penmanship				
Social Studies				
Science/Health				

* Grades not given this nine weeks

ALTERNATE ASSESSMENTS

Indicate those used with a check (✓).

	Marking Period			
	1st	2nd	3rd	4th
Skills Checklist(s)				
Portfolio				
Audio Cassette Recording				
Video Recording				
Computer Program				
Standardized Test(s)				
Observations/Written Comments				
Other				

MARKING CODES - FINE ARTS

3 - Outstanding effort and participation
2 - Satisfactory effort and participation
1 - Inadequate effort and participation; parent conference requested

FINE ARTS REPORT

	Marking Period			
	1st	2nd	3rd	4th
Art				
Music				
Physical Education				

PARENT/GUARDIAN/TEACHER CONFERENCE

	Marking Period			
	1st	2nd	3rd	4th
Conference conducted <i>(Indicate date)</i>				

ATTENDANCE

Regular attendance and punctuality are essential for quality education.

	Marking Period			
	1st	2nd	3rd	4th
Days Present				
Days Absent				
Days Tardy				
Information Included				

PLACEMENT *

Grade 6 Special Session _____

* If Special Session program is indicated, grade placement will be determined by the home school.



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
1997-1998 END-OF-YEAR REPORT CARD INSERT for GRADES 1-5

[Redacted] School [Redacted]
5 Grade [Redacted]

Dear Parent(s)/Guardian(s),

In a continuing effort to keep you informed, this report card insert is being provided to notify you of your child's progress toward meeting the school district's desired levels of performance in reading, writing, and mathematics. Your child's end-of-year performance level in reading, writing, and mathematics is identified below.

READING

- At or above grade level
- Below grade level*

WRITING (COMPOSITION)

- At or above grade level
- Below grade level*

MATHEMATICS

- At or above grade level
- Below grade level*

*If **Below grade level** has been indicated for reading, writing, and/or mathematics, you will be asked to participate in the development of a plan to improve your child's academic performance. This plan will be developed at the beginning of the 1998-1999 school year.

Sincerely,

[Redacted Signature]
Teacher

PBSD 1674 (NEW 5/15/98)

White/Cumulative Folder

Yellow/Report Card

STUDENT NAME: _____
 Legal _____

SEX: **F**
 RACIAL/ETHNIC GROUP:
 White, Not Hispanic
 Black, Not Hispanic
 Hispanic
 American Indian/Native Alaskan
 Asian/Pacific Islander

STUDENT NUMBER: _____
 PHONE NUMBER (optional): _____

BIRTHDATE: _____
 Verified by Birth Certificate: Yes
 If Not, What Type Verification? _____

ADDRESS: (use pencil in this space, until final.)

BIRTHPLACE:
West Palm Beach, FL

NAME OF PARENT(S) OR LEGAL GUARDIAN OR OTHER RESPONSIBLE ADULT AT HOME:

 P G OA

CURRENT SCHOOL: (use pencil in this space, until final.)
 Name _____
 Street _____
 City Royal Palm Beach, FL

Date First Entered This District: 8-25-92
 Withdrawal Date: _____
 Withdrawal Date: _____
 Withdrawal Date: _____

School:	Grade:										
_____	<u>K</u>	_____	<u>1</u>	_____	<u>2</u>	_____	<u>3</u>	_____	<u>4</u>		
School Year: 19- <u>92</u> -19 <u>93</u>		School Year: 19- <u>93</u> -19 <u>94</u>		School Year: 19- <u>94</u> -19 <u>95</u>		School Year: 19- <u>95</u> -19 <u>96</u>		School Year: 19- <u>96</u> -19 <u>97</u>			
Days Present: <u>171</u>	Days Absent: <u>9</u>	Days Present: <u>176</u>	Days Absent: <u>4</u>	Days Present: <u>172</u>	Days Absent: <u>8</u>	Days Present: <u>172</u>	Days Absent: <u>8</u>	Days Present: <u>179</u>	Days Absent: <u>1</u>		
Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark
MATHEMATICS			MATHEMATICS			MATHEMATICS			MATHEMATICS		
READING			READING			READING			READING		
LANGUAGE			LANGUAGE			LANGUAGE			LANGUAGE		
SPELLING			SPELLING			SPELLING			SPELLING		
HANDWRITING			HANDWRITING			HANDWRITING			HANDWRITING		
SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES		
SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH		
BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE		
Indicate: Promote (P)	<u>P</u>		Indicate: Promote (P)			Indicate: Promote (P)			Indicate: Promote (P)		
Retain (R)			Retain (R)	<u>SS</u>		Retain (R)			Retain (R)		
Summer School (SS)			Summer School (SS)			Summer School (SS)			Summer School (SS)		
School:	Grade:										
_____	<u>5</u>	_____		_____		_____		_____			
School Year: 19- <u>97</u> -19 <u>98</u>		School Year: 19-____-19-____									
Days Present: <u>178</u>	Days Absent: <u>2</u>	Days Present:	Days Absent:								
Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark	Subject	Teacher	Mark
MATHEMATICS			MATHEMATICS			MATHEMATICS			MATHEMATICS		
READING			READING			READING			READING		
LANGUAGE			LANGUAGE			LANGUAGE			LANGUAGE		
SPELLING			SPELLING			SPELLING			SPELLING		
HANDWRITING			HANDWRITING			HANDWRITING			HANDWRITING		
SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES			SOCIAL STUDIES		
SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH			SCIENCE and HEALTH		
BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE			BEHAVIOR CODE AVERAGE		
Indicate: Promote (P)			Indicate: Promote (P)			Indicate: Promote (P)			Indicate: Promote (P)		
Retain (R)			Retain (R)			Retain (R)			Retain (R)		
Summer School (SS)			Summer School (SS)			Summer School (SS)			Summer School (SS)		

FLORIDA PERMANENT RECORD CARD
 CATEGORY A - Education Records
 GRADES K-5



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY

NEW/RETURNING STUDENTS
REGISTRATION

DISTR: 1691 TCHR: [REDACTED] TNBR: 059STDT [REDACTED]
08/09/00 CRS: 2002100 SEC: 06 BLDG: 00 RM: 801

STUDENT NUMBER:

VERIFICATION FOR NEW/RETURNING STUDENTS:
TO THE PARENTS OR GUARDIANS:

NEW STUDENTS: Complete all non-shaded areas on both sides of form
RETURNING STUDENTS: Please review both sides for correctness of typed information. If the information printed is incorrect, please correct it by carefully and lightly crossing out the incorrect information and writing the correct information above it.

(1) STUDENT'S LEGAL NAME [REDACTED]			(2) ALSO KNOWN AS		
(3) LOCAL ADDRESS [REDACTED]			(4) MAILING ADDRESS		
(5) STUDENT'S SOCIAL SECURITY NO. (OPTIONAL) [REDACTED]			(6) HOME PHONE NO. [REDACTED]		
(7) SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE		(8) RACE <input type="checkbox"/> I AMERICAN INDIAN OR ALASKAN NATIVE <input type="checkbox"/> B BLACK NON-HISPANIC		<input type="checkbox"/> A ASIAN OR PACIFIC ISLANDER <input type="checkbox"/> H HISPANIC	
<input type="checkbox"/> W WHITE NON-HISPANIC		<input type="checkbox"/> M MULTIRACIAL			
(9) DATE OF BIRTH [REDACTED]			(10) PLACE OF BIRTH WEST PALM BEACH FL US FLORIDA		

(11) RESIDENT STATUS 3				(12) ENTRY DATE INTO USA	
<input type="checkbox"/> 0. FOREIGN EXCHANGE STUDENT	<input type="checkbox"/> 1. OUT-OF-COUNTY RESIDENT	<input type="checkbox"/> 2. OUT-OF-STATE RESIDENT	<input type="checkbox"/> 3. IN-COUNTY RESIDENT		

(13) FEDERAL IMPACT AID SURVEY

YES NO A. THE STUDENT RESIDES ON FEDERAL PROPERTY.

YES NO B. THE STUDENT RESIDES IN LOW RENT HOUSING.

YES NO C. THE PARENT IS EMPLOYED ON FEDERAL PROPERTY LOCATED IN PALM BEACH COUNTY.

YES NO D. THE PARENT IS EMPLOYED ON LOW RENT HOUSING LOCATED IN PALM BEACH COUNTY.

YES NO E. THE PARENT IS IN THE UNIFORMED SERVICES OF THE UNITED STATES.

IF YES, IS THE PARENT ON ACTIVE DUTY? YES NO

AIR FORCE ARMY COAST GUARD MARINES NATIONAL GUARD NAVY

(14) HAS THIS CHILD BEEN ENROLLED IN ANY PRESCHOOL? (PLEASE PLACE A CHECKMARK (✓) BY EACH PROGRAM ATTENDED. ALSO, INDICATE WITH AN ASTERISK (*) THE PROGRAM YOUR CHILD WAS IN THE LONGEST.)

C. CHAPTER 1 H. HEADSTART O. OTHER

D. PRE-K DISABILITIES M. MIGRANT PRE-K S. SUBSIDIZED CHILD CARE

I. PRE-K EARLY INTERVENTION N. NON-SUBSIDIZED CHILD CARE

(15) IS THE STUDENT A SINGLE PARENT? NO YES NO

(16) CURRENT GRADE LEVEL 08

TRANSFER INFORMATION:

(17) NAME OF SCHOOL TRANSFERRING FROM	(18) CITY OR LOCATION	(19) DATE OF LAST ATTENDANCE
(20) GRADE LEVEL	(21) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(22) DATE ATTENDED

FREE OR REDUCED PRICE LUNCH AND HEALTH INFORMATION:

(23) HAVE YOU FILLED OUT AN APPLICATION FOR FREE OR REDUCED LUNCH? (APPLICATION IS PROVIDED WITH THIS REGISTRATION FORM) YES NO

(24) HEALTH SCREENINGS:

I GIVE PERMISSION FOR MY CHILD TO BE GIVEN NON-INVASIVE HEALTH SCREENINGS. THESE TESTS MAY BE GIVEN INDIVIDUALLY OR IN GROUPS. FOR EXAMPLE: VISION, HEARING, SCOLIOSIS, HEIGHT & WEIGHT

YES YES NO

(25) SODIUM FLUORIDE:

I GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SODIUM FLUORIDE PROGRAM TO PREVENT DENTAL DECAY. PERMISSION IS VALID THROUGH GRADE SIX.

YES YES NO

NEW STUDENTS TO PALM BEACH COUNTY: Complete the following sections

(26) HOME LANGUAGE SURVEY (#'s 26-29)

1. IS A LANGUAGE OTHER THAN ENGLISH USED IN THE HOME? YES NO If yes, what language? _____

2. DOES THE STUDENT HAVE A FIRST LANGUAGE OTHER THAN ENGLISH? YES NO If yes, what language? _____

3. DOES THE STUDENT MOST FREQUENTLY SPEAK A LANGUAGE OTHER THAN ENGLISH? YES NO If yes, what language? _____

(27) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE PARENT or GUARDIAN?	(28) WHAT LANGUAGE IS THE STUDENT'S FIRST (1st) LANGUAGE?	(29) DATE OF ENTRY INTO AN ESOL PROGRAM	(30) DISCLOSURES FOR ENTRY into this School District HAS THE STUDENT EVER:
			1. Been expelled from school? <input type="checkbox"/> YES <input type="checkbox"/> NO
			2. Had an arrest resulting in a charge? <input type="checkbox"/> YES <input type="checkbox"/> NO
			3. Had any juvenile justice actions? <input type="checkbox"/> YES <input type="checkbox"/> NO

(31) STUDENT LIVES WITH (CHECK ONE)
 BOTH PARENTS MOTHER FATHER SHARED CUSTODY OTHER

(32) TRANSPORTED BY: Student will be transported to/from school by (name if other than parent)

(33) IS THERE A COURT ORDER BARRING EITHER PARENT FROM REMOVING OR CONTACTING THE STUDENT DURING THE SCHOOL DAY? YES NO
IF YES, PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE COURT ORDER.

(34) FATHER/GUARDIAN: DOES FATHER HAVE CUSTODY? YES NO
 YES

(35) MOTHER/GUARDIAN: DOES MOTHER HAVE CUSTODY? YES NO
 YES

FIRST NAME MIDDLE LAST
 [REDACTED] ROYAL PALM BEACH FL 33411

HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION

PLACE OF EMPLOYMENT

HOME PHONE BUSINESS PHONE

(36) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATE)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(37) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATE)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(38) LEGAL GUARDIAN (IF ANY) DOES LEGAL GUARDIAN HAVE CUSTODY? YES NO

FIRST NAME MIDDLE LAST
 HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION PLACE OF EMPLOYMENT BUSINESS PHONE

EMERGENCY HEALTH AND SAFETY INFORMATION

PART I: PERSON(S) OTHER THAN PARENT AUTHORIZED TO PICK UP STUDENT

(39) PASSWORD: (LIMIT 10 CHARACTERS)

(40) AUTHORIZED FOR EMERGENCY PICKUP YES NO

(41) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]		[REDACTED]	OTHER Sister	<input type="checkbox"/> YES <input type="checkbox"/> NO
(42) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]		[REDACTED]	Aunt	<input type="checkbox"/> YES <input type="checkbox"/> NO
(43) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(44) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(45) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO

(46) PART II: IF SCHOOL PERSONNEL ARE UNABLE TO CONTACT YOU IN CASE OF ILLNESS OR ACCIDENT, MAY WE HAVE YOUR PERMISSION TO CALL YOUR DOCTOR OR EMERGENCY SERVICES (911) FOR TRANSPORT TO THE HOSPITAL? YES NO

(47) FAMILY DOCTOR (48) PHONE NUMBER (49) HOSPITAL PREFERENCE

(50) LIST YOUR CHILD'S ILLNESSES, BEHAVIORAL HEALTH ISSUES, ALLERGIES, MEDICATIONS TAKEN, OR OTHER PHYSICAL LIMITATIONS:

(51) DOES YOUR CHILD CURRENTLY HAVE HEALTH INSURANCE? YES NO
 If yes, please indicate.....
 Medicaid
 Healthy Kids/Kid Care
 Private
 Interested in receiving information

YOUR CHILDREN IN OTHER PALM BEACH COUNTY SCHOOLS

(52) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(53) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(54) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(55) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE
(56) NAME OF CHILD	SCHOOL ATTENDING	STUDENT NO. (OPTIONAL)	GRADE	BIRTH DATE

(57) I VERIFY THAT THE INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF P [REDACTED] LEGAL GUARDIAN DATE 8-17-00

FOR OFFICE USE ONLY:

(58) SCHOOL NO. 1691	(59) STUDENT NUMBER [REDACTED]	(60) STUDENT LANGUAGE EN	(61) COB US	(62) ENTRY CODE E01	(63) ENTRY DATE 08/16/00	(64) SAC CODE 106D			
(65) PARENT/GUARDIAN LANGUAGE EN	(66) GRADE LEVEL 08	(67) CALENDAR 01	(68) TEACHER NO.	(69) REASSIGNMENT CODE <input type="checkbox"/> A-ADM <input type="checkbox"/> E-ESE <input type="checkbox"/> B-ESOL <input type="checkbox"/> M-MAG	(70) TRANSPORTATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	(71) VERIFICATION OF BIRTH 1	(72) HRS Z	(73) DOCUMENTATION CHECKLIST (CHECK AND DATE WHEN RECEIVED)	
				IMMUNIZATIONS <input type="checkbox"/> DATE	VERIFICATION OF BIRTH RECORDS <input type="checkbox"/> DATE		SOCIAL SECURITY NO. (OPTIONAL) <input type="checkbox"/> DATE		PHYSICAL EXAMS <input type="checkbox"/> DATE
(74) DATA ENTRY COMPLETED BY:								DATE:	



THE SCHOOL DISTRICT OF
PALM BEACH COUNTY

NEW/RETURNING STUDENTS REGISTRATION

STUDENT NUMBER:

VERIFICATION FOR NEW/RETURNING STUDENTS: TO THE PARENTS OR GUARDIANS:

NEW STUDENTS: Complete all non-shaded areas on both sides of form
RETURNING STUDENTS: Please review both sides for correctness of typed information. If the information printed is incorrect, please correct it by carefully and lightly crossing out the incorrect information and writing the correct information above it.

DISTR: 1761 TCHR: [REDACTED] TNBR: 504STDT: [REDACTED] HMRM: 504

RUN DATE: _____

(1) STUDENT'S LEGAL NAME [REDACTED] [REDACTED] [REDACTED] LAST FIRST MIDDLE			(2) ALSO KNOWN AS
(3) LOCAL ADDRESS [REDACTED] HOUSE NO. STREET NAME APT. NO.		(4) MAILING ADDRESS [REDACTED] HOUSE NO. STREET NAME APT. NO.	
(5) STUDENT'S SOCIAL SECURITY NO. (OPTIONAL) [REDACTED]	(6) HOME PHONE NO. [REDACTED]	(7) SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	(8) RACE <input checked="" type="checkbox"/> W AMERICAN INDIAN OR ALASKAN NATIVE <input type="checkbox"/> I <input type="checkbox"/> B BLACK NON-HISPANIC <input type="checkbox"/> A ASIAN OR PACIFIC ISLANDER <input type="checkbox"/> H HISPANIC <input type="checkbox"/> W WHITE NON-HISPANIC <input type="checkbox"/> M MULTIRACIAL

(9) DATE OF BIRTH [REDACTED] MONTH DAY YEAR	(10) PLACE OF BIRTH WEST PALM BEACH FL US FLORIDA CITY STATE COUNTRY
---	--

(11) RESIDENT STATUS 3 <input type="checkbox"/> D. FOREIGN EXCHANGE STUDENT <input type="checkbox"/> 1. OUT-OF-COUNTY RESIDENT <input type="checkbox"/> 2. OUT-OF-STATE RESIDENT <input type="checkbox"/> 3. IN-COUNTY RESIDENT	(12) ENTRY DATE INTO USA
--	--------------------------

(13) FEDERAL IMPACT AID SURVEY

YES NO A. THE STUDENT RESIDES ON FEDERAL PROPERTY.

YES NO B. THE STUDENT RESIDES IN LOW RENT HOUSING.

YES NO C. THE PARENT IS EMPLOYED ON FEDERAL PROPERTY LOCATED IN PALM BEACH COUNTY.

YES NO D. THE PARENT IS EMPLOYED ON LOW RENT HOUSING LOCATED IN PALM BEACH COUNTY.

YES NO E. THE PARENT IS IN THE UNIFORMED SERVICES OF THE UNITED STATES.

IF YES, IS THE PARENT ON ACTIVE DUTY? YES NO

AIR FORCE ARMY COAST GUARD MARINES NATIONAL GUARD NAVY

(14) HAS THIS CHILD BEEN ENROLLED IN ANY PRESCHOOL? *no* (PLEASE PLACE A CHECKMARK (✓) BY EACH PROGRAM ATTENDED. ALSO, INDICATE WITH AN ASTERISK (*) THE PROGRAM YOUR CHILD WAS IN THE LONGEST.)

C. CHAPTER 1 H. HEADSTART D. OTHER

D. PRE-K DISABILITIES M. MIGRANT PRE-K S. SUBSIDIZED CHILD CARE

E. PRE-K EARLY INTERVENTION N. NON-SUBSIDIZED CHILD CARE

(15) IS THE STUDENT A SINGLE PARENT? <i>no</i> <input type="checkbox"/> YES <input type="checkbox"/> NO	(16) CURRENT GRADE LEVEL 05
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TRANSFER INFORMATION:

(17) NAME OF SCHOOL TRANSFERRING FROM	(18) CITY OR LOCATION	(19) DATE OF LAST ATTENDANCE
(20) GRADE LEVEL	(21) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(22) DATE ATTENDED

FREE OR REDUCED PRICE LUNCH AND HEALTH INFORMATION:

(23) HAVE YOU FILLED OUT AN APPLICATION FOR FREE OR REDUCED LUNCH? (APPLICATION IS PROVIDED WITH THIS REGISTRATION FORM) *no* YES NO

(24) HEALTH SCREENINGS:

I GIVE PERMISSION FOR MY CHILD TO BE GIVEN HEALTH SCREENINGS. THESE TESTS MAY BE GIVEN INDIVIDUALLY OR IN GROUPS. YES YES NO

(25) SODIUM FLUORIDE:

I GIVE PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SODIUM FLUORIDE PROGRAM TO PREVENT DENTAL DECAY. PERMISSION IS VALID THROUGH GRADE SIX. YES YES NO

NEW STUDENTS TO PALM BEACH COUNTY: HOME LANGUAGE SURVEY

(26) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE PARENT or GUARDIAN:	(27) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE STUDENT?	(28) DATE OF ENTRY INTO THE ESOL PROGRAM
---	--	--

(29) LANGUAGE SURVEY

1. IS A LANGUAGE OTHER THAN ENGLISH USED IN THE HOME? YES NO

2. DOES THE STUDENT HAVE A FIRST LANGUAGE OTHER THAN ENGLISH? YES NO

3. DOES THE STUDENT MOST FREQUENTLY SPEAK A LANGUAGE OTHER THAN ENGLISH? YES NO

(30) STUDENT LIVES WITH (CHECK ONE)
 BOTH PARENTS MOTHER FATHER SHARED CUSTODY OTHER

(31) TRANSPORTED BY: Student will be transported to/from school by (name if other than parent)

(32) IS THERE A COURT ORDER BARRING EITHER PARENT FROM REMOVING OR CONTACTING THE STUDENT DURING THE SCHOOL DAY? YES NO
 IF YES, PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE COURT ORDER.

(33) FATHER/GUARDIAN: DOES FATHER HAVE CUSTODY? YES NO
 [REDACTED] YES

(34) MOTHER/GUARDIAN: DOES MOTHER HAVE CUSTODY? YES NO
 [REDACTED] YES

FIRST NAME MIDDLE LAST
 [REDACTED] ROYAL PALM BEACH FL 33411

HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION

PLACE OF EMPLOYMENT

HOME PHONE BUSINESS PHONE

(35) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATED)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(36) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATED)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE GRADUATE or ABOVE

(37) LEGAL GUARDIAN (IF ANY) DOES LEGAL GUARDIAN HAVE CUSTODY? YES NO

FIRST NAME MIDDLE LAST HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION PLACE OF EMPLOYMENT BUSINESS PHONE

EMERGENCY HEALTH AND SAFETY INFORMATION

(38) PART I: PERSON(S) OTHER THAN PARENT AUTHORIZED TO PICK UP STUDENT. (39) PASSWORD: (40) AUTHORITY FOR EMERGENCY PICKUP

(40) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(41) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(42) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(43) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO
(44) NAME	ADDRESS	PHONE	RELATIONSHIP	<input type="checkbox"/> YES <input type="checkbox"/> NO

(46) PART II: IF SCHOOL PERSONNEL ARE UNABLE TO CONTACT YOU IN CASE OF ILLNESS OR ACCIDENT, MAY WE HAVE YOUR PERMISSION TO CALL YOUR DOCTOR OR EMERGENCY SERVICES (911) FOR TRANSPORT TO THE HOSPITAL? YES NO

(47) FAMILY DOCTOR (48) PHONE NUMBER (49) HOSPITAL PREFERENCE

(50) IF YOUR CHILD SUFFERS FROM ANY ILLNESS, ALLERGIES OR HAS ANY PHYSICAL LIMITATIONS THAT WE SHOULD BE AWARE OF, PLEASE LIST:

YOUR CHILDREN IN OTHER PALM BEACH COUNTY SCHOOLS:

(51) NAME(S) OF CHILD(REN)	(52) SCHOOL ATTENDING	(53) STUDENT NO. (OPTIONAL)	(54) GRADE	(55) BIRTH DATE

(56) I VERIFY THAT THE INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF PARENT OR LEGAL GUARDIAN DATE

FOR OFFICE USE ONLY:

(57) SCHOOL NO. 1761	(58) STUDENT NUMBER [REDACTED]	(59) STUDENT LANGUAGE EN	(60) COB US	(61) ENTRY CODE E01	(62) ENTRY DATE 08/20/97	(63) SAC CODE 108D
		(64) PARENT/GUARDIAN LANGUAGE EN		(65) GRADE LEVEL 05	(66) CALENDAR 01	(67) TEACHER NO. 504
(68) REASSIGNMENT CODE <input type="checkbox"/> A-ADM <input type="checkbox"/> R-ESE <input type="checkbox"/> B-ESOL <input type="checkbox"/> M-MAG	(69) TRANSPORTATION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	(70) VERIFICATION OF BIRTH 1 Z	(71) HRS DATE	(72) DOCUMENTATION CHECKLIST (CHECK AND DATE WHEN RECEIVED)		
				IMMUNIZATIONS <input type="checkbox"/> DATE	VERIFICATION OF BIRTH RECORDS	
				SOCIAL SECURITY NO. (OPTIONAL) <input type="checkbox"/> DATE	PHYSICAL EXAMS	
(73) DATA ENTRY COMPLETED BY:						DATE



The School District of Palm Beach County
**NEW/RETURNING STUDENTS
 REGISTRATION**

DISTRIBUTION: 1761 TCHR: EICHNER,

TNBR: 402
 HMRM: 402

RUN DATE: 8/14/96

STDT: [REDACTED]

**VERIFICATION FOR NEW/RETURNING STUDENTS:
 TO THE PARENTS OR GUARDIANS:**
 NEW STUDENTS: Complete all non-shaded areas.
 RETURNING STUDENTS: Please review both sides for
 correctness of typed information shown below and on the
 other side. If the information printed is incorrect, please
 correct it by carefully and lightly crossing out the incorrect
 information and writing the correct information above it.

(1) STUDENT'S LEGAL NAME [REDACTED]			(2) ALSO KNOWN AS		
LAST [REDACTED] FIRST [REDACTED] MIDDLE [REDACTED]					
(3) LOCAL ADDRESS [REDACTED]			(4) MAILING ADDRESS		
HOUSE NO. [REDACTED] STREET NAME [REDACTED] APT. NO. [REDACTED]			HOUSE NO. [REDACTED] STREET NAME [REDACTED] APT. NO. [REDACTED]		
CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]			CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]		
(5) STUDENT'S SOCIAL SECURITY NO. (OPTIONAL) [REDACTED]	(6) HOME PHONE NO. [REDACTED]	(7) SEX F <input type="checkbox"/> MALE M <input type="checkbox"/>	(8) RACE W <input checked="" type="checkbox"/> AMERICAN INDIAN B <input type="checkbox"/> BLACK NON-HISPANIC A <input type="checkbox"/> ASIAN PACIFIC ISLANDER H <input type="checkbox"/> HISPANIC W <input type="checkbox"/> WHITE NON-HISPANIC M <input type="checkbox"/> MULTI-RACIAL		
(9) DATE OF BIRTH [REDACTED]	(10) PLACE OF BIRTH FLORIDA WEST PALM BEACH FL US		(11) RESIDENT STATUS 3 0. FOREIGN EXCHANGE STUDENT 1. OUT-OF-COUNTY RESIDENT 2. OUT-OF-STATE RESIDENT 3. IN-COUNTY RESIDENT	(12) ENTRY DATE INTO USA	
(13) FEDERAL IMPACT AID SURVEY (IF APPLICABLE) (CHECK THE LETTER CODE FOR ONE CODE ONLY) A. Student resides on federal property, parent employed on federal property, not in a uniformed service I. Student resides on federal property, parent not employed on federal property J. Student resides in low rent housing, parent not employed on federal property K. Student resides on nonfederal property, parent employed on federal property in Palm Beach County O. Student resides on nonfederal property, parent on active-duty in uniformed services		(14) HAS THIS CHILD BEEN ENTERED IN ANY PRESCHOOL? (Please place a checkmark (✓) by each program attended. Also, indicate with an asterisk (*) the program your child was in the longest.) C. CHAPTER 1 D. PRE-K DISABILITIES E. PRE-K EARLY INTERVENTION H. HEADSTART		(15) IS THE STUDENT A SINGLE PARENT? NO YES <input type="checkbox"/> NO <input type="checkbox"/>	
		M. MIGRANT PRE-K N. NON-SUBSIDIZED CHILD CARE O. OTHER <input checked="" type="checkbox"/> S. SUBSIDIZED CHILD CARE		(16) GRADE LEVEL 04	

TRANSFER INFORMATION:

(17) NAME OF SCHOOL TRANSFERRING FROM	(18) CITY OR LOCATION	(19) DATE OF LAST ATTENDANCE
(20) GRADE LEVEL	(21) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(22) DATE ATTENDED

FREE OR REDUCED PRICE LUNCH AND HEALTH INFORMATION:

(23) HAVE YOU FILLED OUT AN APPLICATION FOR FREE or REDUCED LUNCH? (Application is provided with this Registration Form) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	(24) HEALTH SCREENINGS: YES I give permission for my child to be given health screenings. These tests may be given individually or in groups. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	(25) SODIUM FLUORIDE: YES I give permission for my child to participate in the Sodium Fluoride Program to prevent dental decay. Permission is valid through grade six. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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NEW STUDENTS TO PALM BEACH COUNTY: HOME LANGUAGE SURVEY

(26) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE PARENT or GUARDIAN:	(27) WHAT LANGUAGE IS SPOKEN IN THE HOME BY THE STUDENT?	(28) DATE OF ENTRY INTO THE ESOL PROGRAM	(29) 1. Is a language other than English used in the home? <input type="checkbox"/> YES <input type="checkbox"/> NO 2. Does the student have a first language other than English? <input type="checkbox"/> YES <input type="checkbox"/> NO 3. Does the student most frequently speak a language other than English? <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--	--	---

FOR OFFICE USE ONLY:

(30) SCHOOL NO. 1761	(31) STUDENT NUMBER [REDACTED]	(32) STUDENT LANGUAGE EN	(33) COB US	(34) ENTRY CODE E01	(35) ENTRY DATE 08/21/96	(36) SAC CODE 106D
		(37) PARENT/GUARDIAN LANGUAGE EN		(38) GRADE LEVEL 04	(39) CALENDAR 01	(40) TEACHER NO. 402
(41) REASSIGNMENT CODE A-ADM <input type="checkbox"/> E-ESE <input type="checkbox"/> B-ESOL <input type="checkbox"/> M-MAD <input type="checkbox"/>	(42) TRANSPORTATION YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	(43) VERIFICATION OF BIRTH 1 <input checked="" type="checkbox"/>	(44) HRS Z <input checked="" type="checkbox"/>	(45) DOCUMENTATION CHECKLIST (CHECK AND DATE WHEN RECEIVED)		
			DATE _____	VACCINATIONS <input type="checkbox"/> DATE _____	VERIFICATION OF BIRTH RECORDS <input type="checkbox"/>	
			DATE _____	SOCIAL SECURITY NO. (OPTIONAL) <input type="checkbox"/> DATE _____	PHYSICAL EXAMS <input type="checkbox"/>	
(46) DATA ENTRY COMPLETED BY: [REDACTED]						DATE: [REDACTED]

(47) I VERIFY THAT THE INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.
 SIGNATURE OF PARENT OR LEGAL GUARDIAN: [REDACTED] DATE: 8-25-96

(48) STUDENT LIVES WITH (CHECK ONE)
 BOTH PARENTS MOTHER FATHER SHARED CUSTODY OTHER

(49) TRANSPORTED BY: Student will be transported to/from school by (name if other than parent) [REDACTED]

(50) IS THERE A COURT ORDER BARRING EITHER PARENT FROM REMOVING OR CONTACTING THE STUDENT DURING THE SCHOOL DAY?
 YES NO IF YES, PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE COURT ORDER.

(51) FATHER/GUARDIAN: DOES FATHER HAVE CUSTODY? YES NO
YES

(52) MOTHER/GUARDIAN: DOES MOTHER HAVE CUSTODY? YES NO
YES

LAST NAME FIRST MIDDLE HOME ADDRESS CITY STATE ZIP CODE
 [REDACTED] [REDACTED] [REDACTED] [REDACTED] ROYAL PALM BEACH FL 33411

OCCUPATION PLACE OF EMPLOYMENT BUSINESS PHONE HOME PHONE

(53) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATE)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE (GRADUATE OR ABOVE)

(54) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (GRADES K-8) B SOME HIGH SCHOOL (GRADES 9-12) C HIGH SCHOOL (GRADUATE)
 D SOME POST-SECONDARY (TECHNICAL/COLLEGE) E TECHNICAL/COLLEGE (GRADUATE OR ABOVE)

(55) LEGAL GUARDIAN (IF ANY) DOES LEGAL GUARDIAN HAVE CUSTODY? YES NO

LAST NAME FIRST MIDDLE HOME ADDRESS CITY STATE ZIP CODE

OCCUPATION PLACE OF EMPLOYMENT BUSINESS PHONE

EMERGENCY HEALTH AND SAFETY INFORMATION

(56) PART I: PERSON(S) OTHER THAN PARENT AUTHORIZED TO PICK UP STUDENT. (57) PASSWORD:

(58) NAME	(59) ADDRESS	(60) PHONE	(61) RELATIONSHIP	(62) AUTHORIZED FOR EMERGENCY PICKUP
[REDACTED]	[REDACTED]	[REDACTED]	Sister	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	Friend & neighbor	<input type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	Friend neighbor	<input type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	Friend	<input type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	Grand-parents	<input type="checkbox"/> YES <input type="checkbox"/> NO

(63) PART II: If school is unable to contact you in case of illness or accident, may we have your permission to call your doctor or emergency services (911) for transport to the hospital? YES NO

(64) FAMILY DOCTOR: *will notify when our company changes Insurance* (65) PHONE NUMBER: [REDACTED] (66) HOSPITAL PREFERENCE: *Wellington Regional Emergency use closest Hospital*

(67) IF YOUR CHILD SUFFERS FROM ANY ILLNESS or HAS ANY PHYSICAL DEFECTS THAT WE SHOULD BE AWARE OF, PLEASE LIST:

YOUR CHILDREN IN OTHER PALM BEACH COUNTY SCHOOLS:

(68) NAME(S) OF CHILD(REN)	(69) SCHOOL ATTENDING	(70) STUDENT NO. (OPTIONAL)	(71) GRADE	(72) BIRTH DATE



The School District of Palm Beach County
**NEW/RETURNING STUDENTS
 REGISTRATION**

DISTRIBUTION: 1761 TCHR: [REDACTED] TNBR: 304
 HMRM: 304

RUN DATE: 8/22/95

STDT: [REDACTED]

**VERIFICATION FOR NEW/RETURNING STUDENTS:
 TO THE PARENTS OR GUARDIANS:**
 NEW STUDENTS: Complete all non-shaded areas.
 RETURNING STUDENTS: Please review both sides for
 correctness of typed information shown below and on the
 other side. If the information printed is incorrect, please
 correct it by carefully and lightly crossing out the incorrect
 information and writing the correct information above it.

(1) STUDENT'S LEGAL NAME [REDACTED] [REDACTED] [REDACTED] LAST FIRST MIDDLE			(2) ALSO KNOWN AS		
(3) LOCAL ADDRESS [REDACTED] HOUSE NO. STREET NAME APT. NO. [REDACTED] CITY STATE ZIP CODE			(4) MAILING ADDRESS [REDACTED] HOUSE NO. STREET NAME APT. NO. [REDACTED] CITY STATE ZIP CODE		
(5) STUDENT'S SOCIAL SECURITY NO. (OPTIONAL) [REDACTED]	(6) HOME PHONE NO. [REDACTED]	(7) SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	(8) RACE <input type="checkbox"/> I AMERICAN INDIAN <input type="checkbox"/> B BLACK NON-HISPANIC <input type="checkbox"/> A ASIAN PACIFIC ISLANDER <input type="checkbox"/> H HISPANIC <input type="checkbox"/> W WHITE NON-HISPANIC		
(9) DATE OF BIRTH [REDACTED] MONTH DAY YEAR	(10) PLACE OF BIRTH WEST PALM BEACH FL US	(11) RESIDENT STATUS 3 <input type="checkbox"/> 0. FOREIGN EXCHANGE STUDENT <input type="checkbox"/> 1. OUT-OF-COUNTY RESIDENT <input type="checkbox"/> 2. OUT-OF-STATE RESIDENT <input type="checkbox"/> 3. IN-COUNTY RESIDENT		(12) GRADE LEVEL 03	
(13) FEDERAL IMPACT AID SURVEY (IF APPLICABLE) (CHECK THE LETTER CODE FOR ONE CODE ONLY) <input type="checkbox"/> A I am in the Federal Military Service. <input type="checkbox"/> B I am a civilian employee in the Federal Military Service and the cost of my child's education is provided in part or wholly by Federal subsidy.		(14) HAS THIS CHILD BEEN ENTERED IN ANY PRESCHOOL? (Please place a checkmark (✓) by each program attended. Also, indicate with an asterisk (*) the program your child was in the longest.) <input type="checkbox"/> C. CHAPTER 1 <input type="checkbox"/> D. PRE-K DISABILITIES <input type="checkbox"/> E. PRE-K EARLY INTERVENTION <input type="checkbox"/> H. HEADSTART <input type="checkbox"/> M. MIGRANT PRE-K <input type="checkbox"/> N. NON-SUBSIDIZED CHILD CARE <input type="checkbox"/> O. OTHER <input type="checkbox"/> S. SUBSIDIZED CHILD CARE		(15) Is the student a single parent? NO <input type="checkbox"/> YES <input type="checkbox"/> NO	

TRANSFER INFORMATION:		
(16) NAME OF SCHOOL TRANSFERRING FROM	(17) CITY OR LOCATION	(18) DATE OF LAST ATTENDANCE
(19) GRADE LEVEL	(20) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(21) DATE ATTENDED

FREE OR REDUCED PRICE LUNCH AND HEALTH INFORMATION:	
(22) Have you filled out an application for Free or Reduced Lunch? (Application is provided with this Registration Form)	<input type="checkbox"/> YES <input type="checkbox"/> NO
(23) HEALTH SCREENINGS: YES I give permission for my child to be given health screenings. These tests may be given individually or in groups. <input type="checkbox"/> YES <input type="checkbox"/> NO	(24) SODIUM FLUORIDE: YES I give permission for my child to participate in the Sodium Fluoride Program to prevent dental decay. Permission is valid through grade six. <input type="checkbox"/> YES <input type="checkbox"/> NO

NEW STUDENTS TO PALM BEACH COUNTY: HOME LANGUAGE SURVEY (To be filled out by new students ONLY)			
(25) What language is spoken in the home by the parent or guardian?	(26) What language is spoken in the home by the student?	(27) Date of Entry into ESOL Program	(28) 1. Is a language other than English used in the home? <input type="checkbox"/> YES <input type="checkbox"/> NO 2. Does the student have a first language other than English? <input type="checkbox"/> YES <input type="checkbox"/> NO 3. Does the student most frequently speak a language other than English? <input type="checkbox"/> YES <input type="checkbox"/> NO

FOR OFFICE USE ONLY:						
(29) SCHOOL NO. 1761	(30) STUDENT NUMBER [REDACTED]	(31) PARENT/GUARDIAN LANGUAGE EN	(32) COG US	(33) ENTRY CODE EO1	(34) ENTRY DATE 08/23/95	(35) SAC CODE 106D
		(36) STUDENT LANGUAGE EN	(37) GRADE LEVEL 03	(38) CALENDAR 01	(39) TEACHER NO. 304	

(40) REASSIGNMENT CODE <input type="checkbox"/> A-ADM <input type="checkbox"/> E-ESE <input type="checkbox"/> B-ESOL <input type="checkbox"/> M-MAG	(41) TRANSPORTATION <input type="checkbox"/> YES <input type="checkbox"/> NO 0 1 2 3 4 5 6	(42) VERIFICATION OF BIRTH 1 2 1 3 4 5 6 7 8 9 T A B Z	(43) VERIFICATION OF BIRTH RECORDS DATE _____ DATE _____	(44) DOCUMENTATION CHECKLIST (CHECK AND DATE WHEN RECEIVED) DATE _____ IMMUNIZATIONS DATE _____ SOCIAL SECURITY NO. (OPTIONAL) DATE _____ PHYSICAL EXAMS
---	--	--	--	---

(45) DATA ENTRY COMPLETED BY: [REDACTED] DATE: [REDACTED]

(46) I VERIFY THAT THE INFORMATION GIVEN IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.
 SIGNATURE OF PARENT OR LEGAL GUARDIAN: [REDACTED] DATE: 8-28-95

(47) STUDENT LIVES WITH (CHECK ONE)
 BOTH PARENTS MOTHER FATHER SHARED CUSTODY OTHER

(48) TRANSPORTED BY: Student will be transported to/from school by (name if other than parent) _____ (49) IS THERE A COURT ORDER BARRING EITHER PARENT FROM REMOVING OR CONTACTING THE STUDENT DURING THE SCHOOL DAY?
 YES NO IF YES, PLEASE PROVIDE THE SCHOOL WITH A COPY OF THE COURT ORDER.

(50) FATHER/GUARDIAN: DOES FATHER HAVE CUSTODY? YES NO
 LAST NAME: [REDACTED] FIRST: [REDACTED] MIDDLE: [REDACTED]
 HOME ADDRESS: ROYAL PALM BEACH CITY FL 33411 STATE ZIP CODE
 OCCUPATION: _____
 PLACE OF EMPLOYMENT: _____
 BUSINESS PHONE: [REDACTED] HOME PHONE: [REDACTED]

(51) MOTHER/GUARDIAN: DOES MOTHER HAVE CUSTODY? YES NO
 LAST NAME: [REDACTED] FIRST: [REDACTED] MIDDLE: [REDACTED]
 HOME ADDRESS: ROYAL PALM BEACH CITY FL 33411 STATE ZIP CODE
 OCCUPATION: _____
 PLACE OF EMPLOYMENT: _____
 BUSINESS PHONE: [REDACTED] HOME PHONE: [REDACTED]

(52) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (Grades K-8) B SOME HIGH SCHOOL (Grades 9-12) C HIGH SCHOOL (Graduate)
 D SOME POST-SECONDARY (Technical/College) E TECHNICAL/COLLEGE (Graduate or above)

(53) HIGHEST LEVEL OF EDUCATION COMPLETED (OPTIONAL)
 A ELEMENTARY SCHOOL (Grades K-8) B SOME HIGH SCHOOL (Grades 9-12) C HIGH SCHOOL (Graduate)
 D SOME POST-SECONDARY (Technical/College) E TECHNICAL/COLLEGE (Graduate or above)

(54) LEGAL GUARDIAN (IF ANY) DOES LEGAL GUARDIAN HAVE CUSTODY? YES NO
 LAST NAME: _____ FIRST: _____ MIDDLE: _____ HOME ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____
 OCCUPATION: _____ PLACE OF EMPLOYMENT: _____ BUSINESS PHONE: _____

EMERGENCY HEALTH AND SAFETY INFORMATION

(55) PART I: Person(s) other than parent authorized to pick up student. (56) PASSWORD: [REDACTED]

(57) NAME	ADDRESS	(58) PHONE	(59) RELATIONSHIP	(60) AUTHORIZED FOR EMERGENCY PICKUP
[REDACTED]	[REDACTED]	[REDACTED]	Grandparent	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	Aunt	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	neighbor	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
[REDACTED]	[REDACTED]	[REDACTED]	Sister	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO

(62) PART II: If school is unable to contact you in case of illness or accident, may we have your permission to call your doctor or emergency services (911) for transport to the hospital? YES NO

(63) FAMILY DOCTOR: [REDACTED] (64) PHONE NUMBER: [REDACTED] (65) HOSPITAL PREFERENCE: Palms West

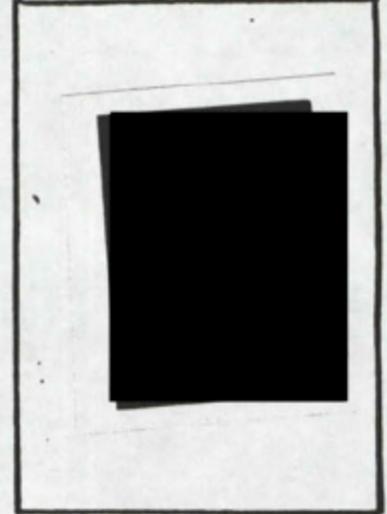
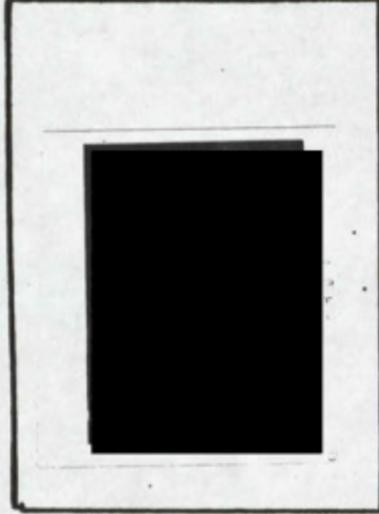
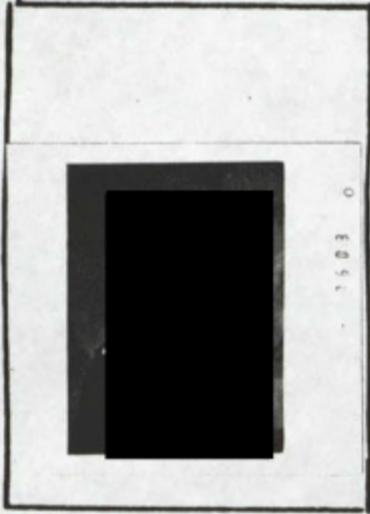
(66) If your child suffers from any illness or has any physical defects that we should be aware of, please list:
 no

YOUR CHILDREN IN OTHER PALM BEACH COUNTY SCHOOLS:

(67) NAME(S) OF CHILD(REN)	(68) SCHOOL ATTENDING	(69) STUDENT NO. (OPTIONAL)	(70) GRADE	(71) BIRTH DATE
None				

PICTURE CARD

NAME [Redacted] Last [Redacted] First [Redacted] Middle [Redacted]



School [Redacted]
Year 1992-93
Grade K

School [Redacted]
Year 1993-94
Grade 1st

School [Redacted]
Year 1994-95
Grade 2nd



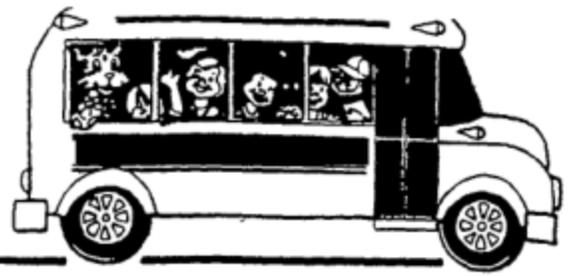
School [Redacted]
Year 95-96
3rd

School [Redacted]
Year 96-97
4th

School [Redacted]
Year 1997-98
5

H.L. JOHNSON

ELEMENTARY SCHOOL



PHONE: [REDACTED] ROYAL PALM BEACH, FLORIDA 33411
PN: [REDACTED] FAX: [REDACTED]
[REDACTED] Principal

8-4-95
Date

Dear Parent

This letter is to notify you that as a result of Special Session (summer school) achievement, your child, [REDACTED], has been promoted to grade 3rd.
Student's Name

You are urged to work cooperatively with your child's teacher during the coming school year and check on your child's progress often.

[REDACTED]
Principal

cc: Student Cumulative Record

THE SCHOOL DISTRICT OF PALM BEACH COUNTY
Elementary School Special Session Registration

304

Student Number _____ Grade 2

Street Address _____ Zip _____

Name of Parent/Guardian _____ Telephone: Home _____ Emergency _____

Home School _____ Home School Teacher _____

Special Session School Assignment _____

Student's Date of Birth _____ High Risk Medical Information none

Legal Information on Record: no yes (Call home school.)

Student is on free lunch reduced lunch

SPECIAL PROGRAM ASSIGNMENT (Check services needed.)
 ESOL Intensive ESOL Support ESE (Program) _____
 Other _____

TRANSPORTATION
 Needed: no yes regular ESE lift) Special Session Bus # _____
 SAC# 106D

RECOMMENDATION FOR SPECIAL SESSION (Check all that apply.)
 Students in grades K-5 who are in ESOL (LEP students), Dropout Prevention, and those in ESE whose IEP includes a recommendation for Special Session.
 Students in grades K-2 who receive recommendation from the principal may attend for remediation purposes only.
 Students in grades 2-5 who received a score in **quartile 1** in the reading comprehension and/or mathematics concepts and applications on the most recent norm-referenced test.
 Students in grades 2-5 who received a score in **quartile 2** in the reading comprehension and/or mathematics concepts and applications on the most recent norm-referenced test along with the recommendation of the principal.

Note: Students retained in their current grade level may be eligible for promotion upon completion of Special Session.

Signature of Teacher / Date 5/4/95 Signature of Principal / Date 5/11/95

PARENT/GUARDIAN NOTIFICATION
 Yes, my child will attend the Special Session (summer school). The information on address and telephone numbers is correct or I have noted changes on my copy of the registration form.
 No, my child will not attend the Special Session (summer school).
 Signature of Parent/Guardian _____ Date 5-5-95

Attachments to the registration form sent to the Special Session school:
 Parent/guardian copy - signed registration form Copy of completed ESE IEP, if appropriate
 Other information _____

To be completed at the conclusion of Special Session:
STUDENT ATTENDANCE RECORD: 18 Days Present 0 Days Absent 0 Days Tardy
 Teacher comments:

showed some improvement in reading comprehension skills.
 Signature of Special Session Administrator / Date 8-4-95

PLACEMENT DECISION
 Made following Special Session
 Promoted Administrative Placement Retained
 Signature of Home School Principal / Date 8-4-95



THE SCHOOL DISTRICT OF PALM BEACH COUNTY (SDPBC)
New and Returning Student Registration

(1) STUDENT NUMBER [REDACTED]	(2) SAC CODE 106D	(3) GRADE LEVEL 12
----------------------------------	----------------------	-----------------------

NEW STUDENTS: Complete all areas on both sides of the form except areas specified.
 RETURNING STUDENTS: Review both sides. If the pre-printed information is incorrect, correct the information by carefully and lightly crossing out the incorrect information and writing the correct information above it. Complete any areas that are blank.

DIST: 2331 TCHR: [REDACTED] NBR: 023 STDT: [REDACTED] CRS: 2104600 SEC: 004 BLDG: 02 RM: 226 08/11/04

(4) STUDENT LEGAL NAME (last, first, middle) [REDACTED]		(5) ALSO KNOWN AS	
(6) LOCAL ADDRESS (house no. & street name) [REDACTED]		(apt. no.)	(city) (state) (zip code)
(7) MAILING ADDRESS (house no. & street name) [REDACTED]		(apt. no.)	(city) (state) (zip code)
(8) SOCIAL SECURITY NO. (optional) [REDACTED]	(9) HOME TELEPHONE NO. [REDACTED]	(10) SEX F	(11) RACE/ETHNIC ORIGIN W <input type="checkbox"/> I-American Indian/Alaskan Native <input type="checkbox"/> B-Black, Non-Hispanic <input type="checkbox"/> H-Hispanic <input type="checkbox"/> A-Asian/Pacific Islander <input type="checkbox"/> W-White, Non-Hispanic <input type="checkbox"/> M-Multiracial
(12) DATE OF BIRTH (MM/DD/YYYY) [REDACTED]	(13) PLACE OF BIRTH (city, state, country) WEST PALM BEACH FL US FLORIDA	(14) RESIDENT STATUS <input type="checkbox"/> 0. Foreign Exchange Student <input type="checkbox"/> 1. Out-of-county Resident <input type="checkbox"/> 2. Out-of-state Resident <input checked="" type="checkbox"/> 3. In-county Resident	
(16) FEDERAL IMPACT SURVEY YES NO <input type="checkbox"/> <input type="checkbox"/> A. The student resides on federal property. <input type="checkbox"/> <input type="checkbox"/> B. The student resides in low rent housing. <input type="checkbox"/> <input type="checkbox"/> C. The parent is employed on federal property located in PB County. <input type="checkbox"/> <input type="checkbox"/> D. The parent is employed on low rent housing located in PB County. <input type="checkbox"/> <input type="checkbox"/> E. The parent is in the uniformed services of the United States. <input type="checkbox"/> <input type="checkbox"/> If E. is YES, is the parent on active duty? Check service below: <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> National Guard <input type="checkbox"/> Navy		(15) USA ENTRY DATE (MM/DD/YYYY) [REDACTED]	
		(17) PRESCHOOL ENROLLMENT INFORMATION Place an X by each program attended. Also, indicate with an asterisk (*) the program your child was in the longest. <input type="checkbox"/> C. Title I Prekindergarten <input type="checkbox"/> M. Migrant Prekindergarten <input type="checkbox"/> D. Pre-K Disabilities <input type="checkbox"/> N. None <input type="checkbox"/> F. Fee for Services <input type="checkbox"/> P. Private Prekindergarten <input type="checkbox"/> H. Head Start <input type="checkbox"/> T. Teenage Parent Program <input type="checkbox"/> L. Readiness Program <input type="checkbox"/> Z. Not Applicable	
		(18) Is the student a single parent? N <input type="checkbox"/> YES <input type="checkbox"/> NO	

TRANSFER STUDENT Only students transferring from another school complete this section

(19) NAME OF SCHOOL TRANSFERRING FROM	(20) CITY / STATE / COUNTY	COUNTRY	(21) LAST ATTENDANCE DATE
(22) LAST GRADE LEVEL	(23) Have you ever been enrolled in a Palm Beach County School? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, what school?	(24) DATE ATTENDED IN PBC	

All new and returning students compete the remaining form including page 2

(25) Students will receive non-invasive health screenings pursuant to Florida Statute § 381.0056(7)(d). Non-invasive screenings may include vision, hearing, scoliosis, height, and weight. These tests may be given individually or in groups. Parents or guardians, however, have the right to request an exemption in writing. If you DO NOT want your child to receive the screenings, write the words "Do not screen" here:
 _____ (This exemption will cover all types of screenings)

(26) I give permission for my child to participate in the sodium fluoride program to prevent tooth decay. YES NO
 (Permission is valid through grade 6) YES

(27) Does your child currently have health insurance? YES NO P
 If YES, indicate: Medicaid Healthy Kids/Kid Care Private Interested in receiving information

(28) HOME LANGUAGE SURVEY (check all that apply)
 A language other than English is used in the home. What language? _____
 The student has a first language other than English. What language? _____
 The student most frequently speaks a language other than English. What language? _____

(29) DISCLOSURES FOR ENTRY INTO PBC SCHOOL DISTRICT (check all that apply)
 The student has been expelled from school. The student has had juvenile justice actions taken against him/her.
 The student has arrested resulting in a charge.

(30) STUDENT LIVES WITH: (check one)
 Mother Father Both Parents Foster Group Home
 Other _____

(31) CUSTODY STATUS OF STUDENT (check one)
 Mother Father Shared Custody
 Other _____

IMPORTANT INFORMATION - MUST BE COMPLETED

(32) Is there a court order barring either parent from removing or contacting the student during the school day?
 Yes No If YES, provide the school with a copy of the court order.

PARENT/LEGAL GUARDIAN INFORMATION

(33) FATHER OR LEGAL GUARDIAN (first, middle initial, last) [REDACTED]		(34) DATE OF BIRTH	(44) MOTHER OR LEGAL GUARDIAN (first, middle initial, last) [REDACTED]		(45) DATE OF BIRTH
(35) ADDRESS (street number, street, apartment number) [REDACTED]			(46) ADDRESS (street number, street, apartment number) [REDACTED]		
(36) CITY ROYAL PALM BEACH FL 33411		STATE ZIP CODE	(47) CITY ROYAL PALM BEACH FL 33411		STATE ZIP CODE
(37) OCCUPATION		(38) HIGHEST ED. LEVEL	(48) OCCUPATION		(49) HIGHEST ED. LEVEL
(39) PLACE OF EMPLOYMENT			(50) PLACE OF EMPLOYMENT		
(40) HOME TELEPHONE	(41) BUSINESS TELEPHONE	(42) CELL/PAGER NUMBER	(51) HOME TELEPHONE	(52) BUSINESS TELEPHONE	(53) CELL/PAGER NUMBER
(43) EMAIL ADDRESS (optional)			(54) EMAIL ADDRESS (optional)		

EMERGENCY HEALTH AND SAFETY INFORMATION

Provide name(s) of person(s), other than parent, allowed to pick up student.

(55) PASSWORD (limit 10 characters)		
(58) NAME (first, middle initial, last) [REDACTED]		(62) NAME (first, middle initial, last)
(57) ADDRESS (street number, street, apartment number)		(63) ADDRESS (street number, street, apartment number)
(56) CITY STATE ZIP CODE		(64) CITY STATE ZIP CODE
(59) RELATIONSHIP OTHER	(60) TELEPHONE [REDACTED]	(61) CELL/PAGER NUMBER
(65) RELATIONSHIP	(66) TELEPHONE	(67) CELL/PAGER NUMBER
(68) STUDENT'S ALLERGIES (check all that apply and specify) <input type="checkbox"/> None <input type="checkbox"/> Animals <input type="checkbox"/> Birds <input type="checkbox"/> Reptiles <input type="checkbox"/> Amphibians <input type="checkbox"/> Plants <input type="checkbox"/> Food <input type="checkbox"/> Other Specify _____		
(69) LIST STUDENT'S ILLNESS, BEHAVIOR ISSUES, MEDICATIONS OR PHYSICAL LIMITATIONS		(70) FAMILY PHYSICIAN
		(71) PHYSICIAN PHONE

NAMES OF PARENT'S/LEGAL GUARDIAN'S OTHER CHILDREN

(72) NAME OF CHILD (first, middle initial, last)	(73) SCHOOL ATTENDING	(74) STUDENT NO. (optional)	(75) GRADE	(76) DATE OF BIRTH
(77) NAME OF CHILD (first, middle initial, last)	(78) SCHOOL ATTENDING	(79) STUDENT NO. (optional)	(80) GRADE	(81) DATE OF BIRTH
(82) NAME OF CHILD (first, middle initial, last)	(83) SCHOOL ATTENDING	(84) STUDENT NO. (optional)	(85) GRADE	(86) DATE OF BIRTH

INFORMATION VERIFICATION

I verify that the information given is true and accurate to the best of my knowledge.

PARENT/GUARDIAN CONSENT

I understand and agree that all educational records of my child may be shared with the District's health care partners and other governmental and social agencies jointly seeing the child or having a legitimate interest in the records, as needed to provide and evaluate health services and government/social services to students. I also understand and agree that my child's medical records or other medical information that I provide to the school, and treatment records or other medical records created by health care personnel at the school will be shared with school officials who have a legitimate educational purpose for accessing such medical records and information.

[REDACTED SIGNATURE] SIGNATURE OF PARENT / LEGAL GUARDIAN

FOR OFFICE USE ONLY

COB US CAL 01 Teacher No. _____
 St. Entry Code E01 Reassign. Code _____
 St. Entry Date 08/11/04 Birth Verification 1
 ESOL Entry Date _____ DCF _____

Documentation Checklist

- Immunizations
- Birth Records Verification
- Social Security Number
- Physical Exams
- Address Verification

Transportation

- PBC Bus # _____
- Palm Tran
- Parent/Student Transportation
- Walk Bike



Spring 2003
Florida Comprehensive Assessment Test (FCAT)
Sunshine State Standards
Grade 10 Student Report

Student Name [REDACTED]
 Student Number [REDACTED]
 School Name and Number [REDACTED]
 District Name and Number [REDACTED]

The Florida Department of Education believes that every student has the ability to learn and succeed. The purpose of the FCAT is to ensure that Florida's public schools are providing the best education possible, and preparing students to succeed in the competitive 21st Century job market.

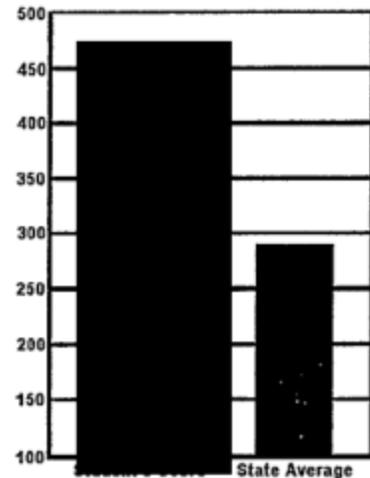
Working with teachers, the State has developed a measurement system that includes reading, writing, mathematics, and science. This report allows you to compare a student's score to other students in the state. Using the "Content Scores," you are able to identify any specific academic skills needing improvement.

Below you will find your 2003 FCAT Science scores. The chart on the right side of the page shows your score compared to the average score this year.

Science Score

Score*	State Comparison		
	Lowest	Middle	Highest
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

The Score is a number between 100 and 500.



Science Content Scores

Content Areas	Points Possible	Points Earned	State Comparison		
			Lowest	Middle	Highest
Physical and Chemical	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Earth and Space	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Life and Environmental	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Scientific Thinking	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

* These scores show your achievement on the day you were tested. If you had taken this test numerous times, it is likely that all of your scores would have been within a certain range. Your 2003 FCAT SSS Science scores probably would have been between 234 and 270.

FCAT Reports

Separate reports are produced for the Sunshine State Standards tests in FCAT Reading and Mathematics, Science, and Writing. A separate report is also printed for the norm-referenced tests in Reading and Mathematics.

FCAT Norm-Referenced Test (NRT) Report The FCAT NRT report shows reading and mathematics scores on a Florida version of the SAT9 (published by Harcourt Educational Measurement). Student scores are compared to a national "norm" group, where a percentile rank score of 50 is average.

Sunshine State Standards (SSS) Reports The FCAT SSS Reading, Mathematics, and Science reports show test scores from Florida's tests of academic standards. These reports contain subject scores and content scores. Subject scores describe the overall achievement, and content scores give the number of points earned in specific skill areas. Success on the Reading and Mathematics tests can be best understood by using the achievement levels where a 3 or higher is on or above grade level.

Achievement Levels Five categories of achievement describe the success students have with the content tested on the FCAT Reading and Mathematics. Level 5 is the highest and Level 1 is the lowest. Since science achievement levels have not been determined, science scores are ranked as to whether they fall in the lowest, middle, or highest third of statewide student performance.

- 5 This student has success with the most challenging content of the Sunshine State Standards. A student scoring in Level 5 answers most of the test questions correctly, including the most challenging questions.
- 4 This student has success with the challenging content of the Sunshine State Standards. A student scoring in Level 4 answers most of the test questions correctly, but may have only some success with questions that reflect the most challenging content.
- 3 This student has partial success with the challenging content of the Sunshine State Standards, but performance is inconsistent. A student scoring in Level 3 answers many of the test questions correctly, but is generally less successful with questions that are the most challenging.
- 2 This student has limited success with the challenging content of the Sunshine State Standards.
- 1 This student has little success with the challenging content of the Sunshine State Standards.

FCAT Certificates Students who earn Level 5 scores or whose science scale scores are greater than 400 receive Certificates of Achievement. For writing, certificates are given to all students with scores of 5.5 or 6 and to fourth graders with scores of 5, 5.5, and 6. Certificates are not awarded based on the FCAT Norm-Referenced Test scores.

Informes FCAT (Spanish)

Se preparan informes separados para los exámenes del FCAT de lectura y matemáticas, ciencias y redacción según las normas estatales *Sunshine State Standards*. También se imprime otro informe por separado para los exámenes de lectura y matemáticas de acuerdo a las normas de aplicación nacional.

Informe sobre el FCAT ceñido a normas de aplicación nacional (NRT) El informe del FCAT NRT presenta los resultados de lectura y matemáticas en una versión del estado de Florida del SAT9 (publicada por Harcourt Educational Measurement). Los resultados obtenidos por los estudiantes se comparan con el grupo modelo o "norma", en el que la clasificación es de un 50% del promedio.

Informes según las normas estatales *Sunshine State Standards* (SSS) Los informes según las normas estatales SSS del FCAT presentan las calificaciones de los exámenes de lectura, matemáticas y ciencias de las normas académicas de Florida. Estos informes contienen calificaciones por materias y calificaciones por contenido. Las calificaciones por materia proporcionan un resumen general del rendimiento y las calificaciones por contenido que proveen el número de puntos obtenidos en áreas de habilidades específicas. El éxito de los exámenes de lectura y matemáticas puede entenderse mejor utilizando los niveles de rendimiento en los que una calificación de 3 o superior está al nivel del grado o por encima.

Niveles de rendimiento El éxito que un estudiante ha logrado en el contenido examinado en el FCAT de lectura y matemáticas se describe por medio de cinco categorías. El nivel 5 es el más alto y el nivel 1 es el más bajo. Como los niveles de rendimiento en ciencias no se han determinado, las calificaciones de ciencias se clasifican con respecto a si entran dentro del tercio inferior, medio o superior del rendimiento estudiantil a nivel estatal.

- 5 Este estudiante tiene éxito con el contenido más difícil de las normas *Sunshine State Standards*. Un estudiante del Nivel 5 responde a la mayoría de las preguntas del examen correctamente, incluyendo las preguntas más difíciles.
- 4 Este estudiante tiene éxito con el contenido difícil de las normas *Sunshine State Standards*. Un estudiante del Nivel 4 responde a la mayoría de las preguntas correctamente, pero es posible que sólo tenga cierto éxito con las preguntas que reflejan el contenido más difícil.
- 3 Este estudiante tiene un éxito parcial con el contenido difícil de las normas *Sunshine State Standards*, pero su rendimiento es inconsistente. Un estudiante del Nivel 3 responde muchas de las preguntas del examen correctamente, pero por lo general tiene menos éxito con las preguntas que son más difíciles.
- 2 Este estudiante tiene éxito limitado con el contenido difícil de las normas *Sunshine State Standards*.
- 1 Este estudiante tiene poco éxito con el contenido difícil de las normas *Sunshine State Standards*.

Certificados del FCAT Los estudiantes que se clasifiquen en el Nivel 5 o cuyos resultados de ciencias sean superiores a 400, reciben Certificados de rendimiento. En redacción, los certificados se otorgan a todos los estudiantes que han obtenido calificaciones de 5.5 y 6, y a los estudiantes de cuarto grado que han obtenido 5, 5.5 y 6. Los certificados no se otorgan basados en los resultados del FCAT ceñido a normas de aplicación nacional.

Rapò FCAT (Haitian Creole)

Yo prepare rapò apa pou egzamen lekti ak matematik, syans ak redaksyon FCAT bay swivan prensip *Sunshine State Standards* yo. Yo ekri yon rapò apa tou pou lekti ak matematik pou "modèl egzamen ofisyèl FCAT itilize pou fè evalyasyon" an.

Rapò egzamen ofisyèl FCAT itilize pou fè evalyasyon (NRT) Rapò FCAT NRT a montre nòt lekti ak matematik nan vèsyon Florida genyen pou SAT9 la (Se Harcourt Educational Measurement ki pibilye li.) Yo konpare nòt elèv la ak yon gwoup nòt yo konsidere kòm "modèl pou egzamen ofisyèl" la, kote swivan klasman pa pousantaj la, nòt mwanyèn nan se 50.

Rapò *Sunshine State Standards* (SSS) Rapò FCAT SSS pou lekti, matematik ak syans lan montre nòt elèv yo fè nan egzamen Florida bay sou prensip akademik yo. Rapò sa yo gen nòt pou matyè ak nòt pou kontni ladan yo. Nòt pou matyè yo dekri tout sa elèv la reyalye anjeneral epi nòt pou kontni yo bay kantite pwen elèv la fè nan yon matyè byen detèmine. Ou ka konprann kisa elèv la reyalye nan egzamen lekti ak matematik la pi byen si w itilize yon nivo siksè kote 3 oswa plis se yon nòt ki nan nivo klas la oswa yon nòt ki pi wo pase nivo klas la.

Nivo siksè elèv yo Gen senk kategori siksè ki dekri nivo siksè elèv yo pote nan kontni yo teste nan egzamen lekti ak matematik FCAT la. Pi gwo nivo a se nivo 5 epi pi piti nivo a se nivo 1. Piske yo poko detèminen nivo siksè nan egzamen syans lan, yo klase nòt pou syans lan swivan si li tonbe pi ba, nan mitan oswa pi wo yon tyè pèfòmans elèv toupatou nan eta a.

- 5 Elèv sa a gen siksè nan matyè ki te gen pi plis difikilte ladan yo nan egzamen *Sunshine State Standards* la. Yon elèv ki nan 5yèm Nivo reponn pifò kesyon egzamen yo kòrèkteman, elèv la menm reponn kesyon ki gen pi plis difikilte ladan yo.
- 4 Elèv sa a gen siksè nan matyè ki te gen difikilte ladan yo nan egzamen *Sunshine State Standards* la. Yon elèv ki nan 4yèm Nivo reponn pifò kesyon egzamen yo kòrèkteman, men li ka gen kèk siksè sèlman nan kesyon ki sanble yo gen pi plis difikilte ladan yo.
- 3 Elèv sa a gen enpe siksè nan matyè ki gen difikilte ladan yo nan egzamen *Sunshine State Standards* la, men pèfòmans lan pa rete estab. Yon elèv ki nan 3yèm Nivo reponn anpil nan kesyon egzamen yo kòrèkteman, men anjeneral li gen mwens siksè ak kesyon ki sanble yo gen pi plis difikilte ladan yo.
- 2 Elèv sa a gen siksè limite nan matyè ki gen difikilte ladan yo nan egzamen *Sunshine State Standards* la.
- 1 Elèv sa a gen yon ti siksè tou piti nan matyè ki gen difikilte ladan yo nan egzamen *Sunshine State Standards* la.

Sètifika FCAT Elèv ki fè nòt 5yèm Nivo oswa elèv ki fè gwo nòt ki pi plis pase 400 nan syans ap resevwa Sètifika pou Siksè. Yo bay tout elèv ki fè nòt 5.5 oswa 6 ak elèv klas katriyèm ki fè nòt 5, 5.5, ak 6 yon sètifika pou redaksyon. Yo pa bay sètifika swivan nòt elèv fè nan egzamen ki baze sou "modèl egzamen ofisyèl FCAT itilize pou fè evalyasyon" (NRT) an.



**Spring 2003
Florida Comprehensive Assessment Test (FCAT)
SUNSHINE STATE STANDARDS
Grade 10 Student Report**

Student Name: [REDACTED]
 Student Number: [REDACTED]
 School Number and Name: [REDACTED]
 District Number and Name: [REDACTED]

The Florida Department of Education believes that every student has the ability to learn and succeed. The purpose of the FCAT is to ensure that Florida's public schools are providing the best education possible, and preparing students to succeed in the competitive 21st Century job market.

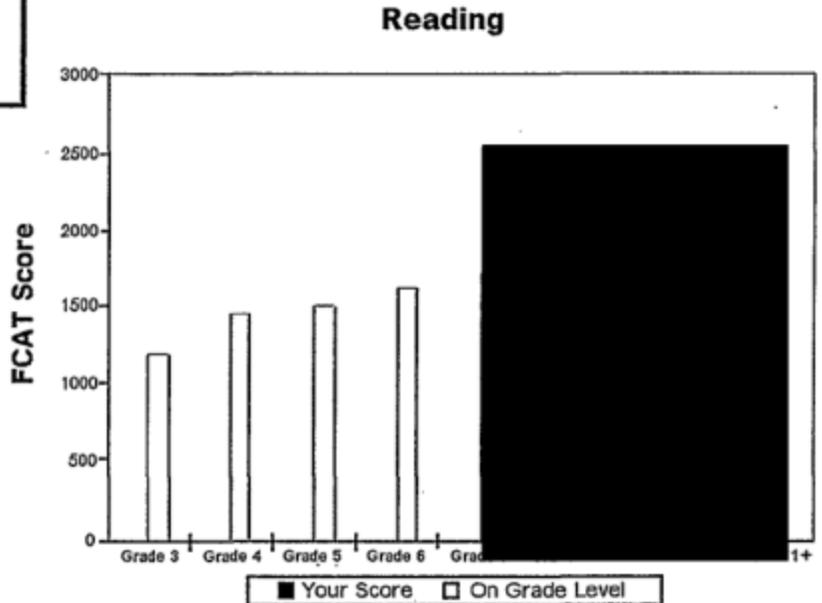
Working with teachers, the State has developed a measurement system that allows you to track a student's academic achievement from year to year and determine if a year's worth of learning has occurred in a year's time. This system also allows you to compare a student's score to a score that represents "grade level" achievement. If a student's score is above the "grade level" score, then they are performing at a level above their current grade. If it is below, they are in need of improvement. Using the "Content Scores," you are able to identify any specific academic skills needing improvement.

Below you will find your 2003 FCAT Reading and Mathematics scores, as well as your scores from previous years. The chart on the right side of the page shows your score compared to the score that represents "grade level" achievement.

You did not score well enough to pass the Grade 10 FCAT Reading test. Your Reading score needs improvement. Talk to your teacher or guidance counselor about classes you can take that will help you improve your score.

2003 Reading Content Scores			
Content Areas	Points Possible	Points Earned	
Words/Phrases			
Main Idea/Purpose			
Comparisons			
Reference/Research			

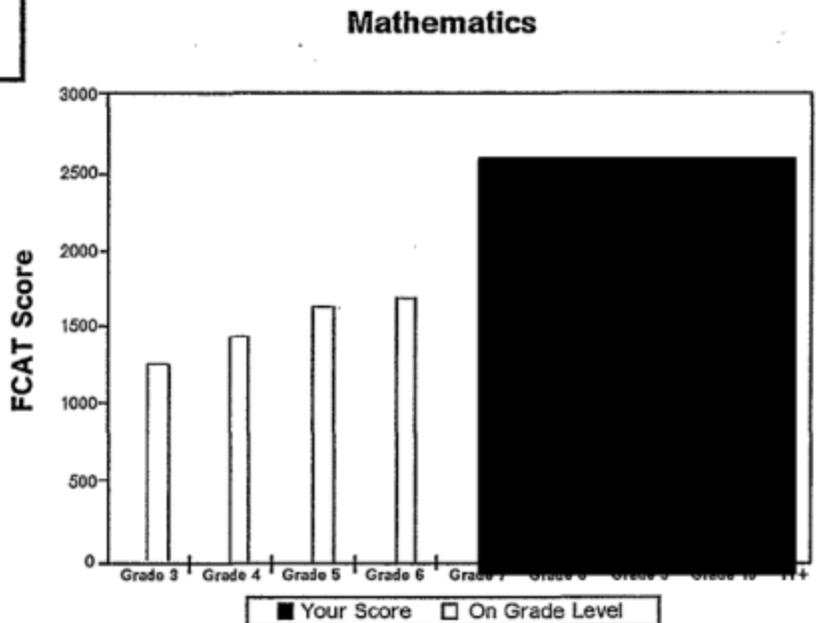
Year	2001	2002	2003
Grade Tested			
Achievement Level			
FCAT Score *			



Congratulations! You have passed the Mathematics test and your score is on grade level. You have answered many of the questions on FCAT correctly.

2003 Mathematics Content Scores			
Content Areas	Points Possible	Points Earned	
Number Sense			
Measurement			
Geometry			
Algebraic Thinking			
Data Analysis			

Year	2001	2002	2003
Grade Tested			
Achievement Level			
FCAT Score *			



* These scores show your achievement on the day you were tested. If you had taken this test numerous times, it is likely that all of your scores would have been within a certain range. Your 2003 FCAT Reading scores probably would have been between 1764 and 1926. Your 2003 FCAT Mathematics scores probably would have been between 1934 and 2008.

NT=Not Tested NR=Not Reported NA=Data Not Available

Data Run Date: 05/09/2003

0165653

FCAT Reports

Separate reports are produced for the Sunshine State Standards tests in FCAT Reading and Mathematics, Science, and Writing. A separate report is also printed for the norm-referenced tests in Reading and Mathematics.

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Niveles de rendimiento El éxito que un estudiante ha logrado en el contenido examinado en el FCAT de lectura y matemáticas se describe por medio de cinco categorías. El nivel 5 es el más alto y el nivel 1 es el más bajo. Como los niveles de rendimiento en ciencias no se han determinado, las calificaciones de ciencias se clasifican con respecto a si entran dentro del tercio inferior, medio o superior del rendimiento estudiantil a nivel estatal.

- 5 Este estudiante tiene éxito con el contenido más difícil de las normas *Sunshine State Standards*. Un estudiante del Nivel 5 responde a la mayoría de las preguntas del examen correctamente, incluyendo las preguntas más difíciles.
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- 3 Este estudiante tiene un éxito parcial con el contenido difícil de las normas *Sunshine State Standards*, pero su rendimiento es inconsistente. Un estudiante del Nivel 3 responde muchas de las preguntas del examen correctamente, pero por lo general tiene menos éxito con las preguntas que son más difíciles.
- 2 Este estudiante tiene éxito limitado con el contenido difícil de las normas *Sunshine State Standards*.
- 1 Este estudiante tiene poco éxito con el contenido difícil de las normas *Sunshine State Standards*.

Certificados del FCAT Los estudiantes que se clasifiquen en el Nivel 5 o cuyos resultados de ciencias sean superiores a 400, reciben Certificados de rendimiento. En redacción, los certificados se otorgan a todos los estudiantes que han obtenido calificaciones de 5.5 y 6, y a los estudiantes de cuarto grado que han obtenido 5, 5.5 y 6. Los certificados no se otorgan basados en los resultados del FCAT ceñido a normas de aplicación nacional.

Rapò FCAT (Haitian Creole)

Yo prepare rapò apa pou egzamen lekti ak matematik, syans ak redaksyon FCAT bay swivan prensip *Sunshine State Standards* yo. Yo ekri yon rapò apa tou pou lekti ak matematik pou "modèl egzamen ofisyèl FCAT itilize pou fè evalyasyon" an.

Rapò egzamen ofisyèl FCAT itilize pou fè evalyasyon (NRT) Rapò FCAT NRT a montre nòt lekti ak matematik nan vèsyon Florida genyen pou SAT9 la (Se Harcourt Educational Measurement ki pibilye li.) Yo konpare nòt elèv la ak yon gwoup nòt yo konsidere kòm "modèl pou egzamen ofisyèl" la, kote swivan klasman pa pousantaj la, nòt mwayèn nan se 50.

Rapò *Sunshine State Standards* (SSS) Rapò FCAT SSS pou lekti, matematik ak syans lan montre nòt elèv yo fè nan egzamen Florida bay sou prensip akademik yo. Rapò sa yo gen nòt pou matyè ak nòt pou kontni ladan yo. Nòt pou matyè yo dekrì tout sa elèv la reyalize anjeneral epi nòt pou kontni yo bay kantite pwen elèv la fè nan yon matyè byen detèmine. Ou ka konprann kisa elèv la reyalize nan egzamen lekti ak matematik la pi byen si w itilize yon nivo siksè kote 3 oswa plis se yon nòt ki nan nivo klas la oswa yon nòt ki pi wo pase nivo klas la.

Nivo siksè elèv yo Gen senk kategori siksè ki dekrì nivo siksè elèv yo pote nan kontni yo teste nan egzamen lekti ak matematik FCAT la. Pi gwo nivo a se nivo 5 epi pi piti nivo a se nivo 1. Piske yo poko detèminen nivo siksè nan egzamen syans lan, yo klase nòt pou syans lan swivan si li tonbe pi ba, nan mitan oswa pi wo yon tyè pèfòmans elèv toupatou nan eta a.

- 5 Elèv sa a gen siksè nan matyè ki te gen pi plis difikilte ladan yo nan egzamen *Sunshine State Standards* la. Yon elèv ki nan 5yèm Nivo reponn pifò kesyon egzamen yo kòrèkteman, elèv la menm reponn kesyon ki gen pi plis difikilte ladan yo.
- 4 Elèv sa a gen siksè nan matyè ki te gen difikilte ladan yo nan egzamen *Sunshine State Standards* la. Yon elèv ki nan 4yèm Nivo reponn pifò kesyon egzamen yo kòrèkteman, men li ka gen kèk siksè sèlman nan kesyon ki sanble yo gen pi plis difikilte ladan yo.
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Sètifika FCAT Elèv ki fè nòt 5yèm Nivo oswa elèv ki fè gwo nòt ki pi plis pase 400 nan syans ap resevwa Sètifika pou Siksè. Yo bay tout elèv ki fè nòt 5.5 oswa 6 ak elèv klas katriyèm ki fè nòt 5, 5.5, ak 6 yon sètifika pou redaksyon. Yo pa bay sètifika swivan nòt elèv fè nan egzamen ki baze sou "modèl egzamen ofisyèl FCAT itilize pou fè evalyasyon" (NRT) an.



THE SCHOOL DISTRICT OF PALM BEACH COUNTY (SDPBC)
New and Returning Student Registration

(1) STUDENT NUMBER [REDACTED]	(2) SAC CODE 106D
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NEW STUDENTS: Complete all non-shaded areas on both sides of the form.
 RETURNING STUDENTS: Review both sides. If the pre-printed information is incorrect, correct the information by carefully and lightly crossing out the incorrect information and writing the correct information above it.

DISTRIBUTION: 2331 STDT: [REDACTED] RUN DATE: 08/07/01

(3) STUDENT'S LEGAL NAME (last, first, middle) [REDACTED]		(4) ALSO KNOWN AS	
(5) LOCAL ADDRESS (house no. & street name) (apt. no.) (city) (state) (zip code) [REDACTED]			
(6) MAILING ADDRESS (house no. & street name) (apt. no.) (city) (state) (zip code) [REDACTED]			
(7) SOCIAL SECURITY NO. (optional)	(8) HOME TELEPHONE NO.	(9) SEX F	(10) RACE/ETHNIC ORIGIN W <input checked="" type="checkbox"/> I-American Indian/Alaskan Native <input type="checkbox"/> B-Black, Non-Hispanic <input type="checkbox"/> H-Hispanic <input type="checkbox"/> A-Asian/Pacific Islander <input type="checkbox"/> W-White, Non-Hispanic <input type="checkbox"/> M-Multiracial
(11) DATE OF BIRTH (MM/DD/YYYY) [REDACTED]	(12) PLACE OF BIRTH (city, state, country) WEST PALM BEACH FL US FLORIDA	(13) RESIDENT STATUS 3 <input type="checkbox"/> 0. Foreign Exchange Student <input type="checkbox"/> 1. Out-of-county Resident <input type="checkbox"/> 2. Out-of-state Resident <input checked="" type="checkbox"/> 3. In-county Resident	(14) USA ENTRY DATE (MM/DD/YYYY)
(15) FEDERAL IMPACT SURVEY YES NO <input type="checkbox"/> <input checked="" type="checkbox"/> A. The student resides on federal property. <input type="checkbox"/> <input checked="" type="checkbox"/> B. The student resides in low rent housing. <input type="checkbox"/> <input checked="" type="checkbox"/> C. The parent is employed on federal property located in P.B. County. <input type="checkbox"/> <input checked="" type="checkbox"/> D. The parent is employed on low rent housing located in P.B. County. <input type="checkbox"/> <input checked="" type="checkbox"/> E. The parent is in the uniformed services of the United States. <input type="checkbox"/> <input type="checkbox"/> If E. is YES, is the parent on active duty? Check service below: <input type="checkbox"/> Air Force <input type="checkbox"/> Army <input type="checkbox"/> Coast Guard <input type="checkbox"/> Marines <input type="checkbox"/> National Guard <input type="checkbox"/> Navy		(16) PRESCHOOL ENROLLMENT INFORMATION Place an X by each program attended. Also, indicate with an asterisk (*) the program your child was in the longest. <input type="checkbox"/> N. Non-subsidized Child Care <input type="checkbox"/> M. Migrant Pre-K <input type="checkbox"/> D. Pre-K Disabilities <input type="checkbox"/> H. Headstart <input type="checkbox"/> I. Pre-K Early Intervention <input type="checkbox"/> C. Chapter 1 <input type="checkbox"/> S. Subsidized Child Care <input type="checkbox"/> O. Other	
		(17) IS THE STUDENT A SINGLE PARENT? NO <input type="checkbox"/> YES <input type="checkbox"/> NO	(18) CURRENT GRADE LEVEL 09

TRANSFER INFORMATION

(19) NAME OF SCHOOL TRANSFERRING FROM	(20) CITY OR LOCATION	(21) LAST ATTENDANCE DATE
(22) LAST GRADE LEVEL	(23) LAST PUBLIC SCHOOL ATTENDED IN PALM BEACH COUNTY	(24) DATE ATTENDED IN PBC

HEALTH SCREENING INFORMATION

(25) Students will receive non-invasive health screenings pursuant to Florida Statute 381.0056(7)(d). Non-invasive screenings may include vision, hearing, scoliosis, height, and weight. These tests may be given individually or in groups. Parents or guardians, however, have the right to request an exemption in writing. If you DO NOT want your child to receive the screenings, write the words "Do not screen" here: _____ (This exemption will cover all types of screenings)	FREE OR REDUCED PRICE LUNCH (27) Have you filled out an application for free and reduced lunch? <input type="checkbox"/> YES <input type="checkbox"/> NO (Application is provided with this form)
(26) I give permission for my child to participate in the sodium fluoride program to prevent tooth decay. <input type="checkbox"/> YES <input type="checkbox"/> NO (permission is valid through 6th grade) YES	

NEW STUDENTS TO PALM BEACH COUNTY

(28) HOME LANGUAGE SURVEY YES NO <input checked="" type="checkbox"/> <input type="checkbox"/> 1. Is a language other than English used in the home? If YES, what language? <u>Spanish</u> <input type="checkbox"/> <input checked="" type="checkbox"/> 2. Does the student have a first language other than English? If YES, what language? <u>NO</u> <input type="checkbox"/> <input checked="" type="checkbox"/> 3. Does the student most frequently speak a language other than English? If YES, what language? _____ (29) 4. What language is spoken in the home by the parent or guardian? <u>English</u> (30) 5. What language is the student's first language? <u>English</u>		(32) STUDENT LIVES WITH. (check one) <input type="checkbox"/> Mother <input checked="" type="checkbox"/> Father <input type="checkbox"/> Both Parents <input type="checkbox"/> Other _____
(31) What is the date of entry into an ESOL program? <u>?</u>	(33) DISCLOSURES FOR ENTRY INTO PBC SCHOOL DISTRICT YES NO <input type="checkbox"/> <input checked="" type="checkbox"/> 1. Has the student ever been expelled from school? <input type="checkbox"/> <input checked="" type="checkbox"/> 2. Has the student ever had an arrest resulting in a charge? <input type="checkbox"/> <input checked="" type="checkbox"/> 3. Has the student ever had any juvenile justice actions?	(34) CUSTODY STATUS OF STUDENT (check one) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Shared Custody <input type="checkbox"/> Other _____
(35) Is there a court order barring either parent from removing or contacting the student during the school day? If YES, provide the school with a copy of the court order.		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

THE SCHOOL DISTRICT OF PALM BEACH COUNTY - NEW AND RETURNING STUDENT REGISTRATION

(36) FATHER OR LEGAL GUARDIAN (first, middle initial, last) [REDACTED] PU: Y			(37) MOTHER OR LEGAL GUARDIAN (first, middle initial, last) [REDACTED] PU: Y		
ADDRESS (street number, street name, apartment number) [REDACTED]			ADDRESS (street number, street name, apartment number) [REDACTED]		
CITY ROYAL PALM BEACH FL 33411		STATE	ZIP CODE	CITY ROYAL PALM BEACH FL 33411	
OCCUPATION <i>Technical support Computers</i>			OCCUPATION		
PL [REDACTED]			PLACE OF EMPLOYMENT		
HOME TELEPHONE [REDACTED]	BUSINESS TELEPHONE [REDACTED]	CELL/PAGER NUMBER [REDACTED]	HOME TELEPHONE [REDACTED]	BUSINESS TELEPHONE [REDACTED]	CELL/PAGER NUMBER
EMAIL ADDRESS (optional) [REDACTED]			EMAIL ADDRESS (optional)		

EMERGENCY HEALTH AND SAFETY INFORMATION

Person(s) other than parent authorized to pick up student			(38) PASSWORD (limit 10 characters) [REDACTED]		
(39) NAME (first, middle initial, last) [REDACTED]			(41) NAME (first, middle initial, last) [REDACTED]		
ADDRESS (street number, street name, apartment number)			ADDRESS (street number, street name, apartment number)		
CITY		STATE	ZIP CODE	CITY	
TELEPHONE [REDACTED]	RELATIONSHIP OTHER	(40) AUTHORIZED FOR EMERGENCY PICKUP <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TELEPHONE	RELATIONSHIP	(42) AUTHORIZED FOR EMERGENCY PICKUP <input type="checkbox"/> YES <input type="checkbox"/> NO

(43) If school personnel are unable to contact you in case of illness or accident, may we have your permission to call your doctor or emergency services (911) for transport to the hospital? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			(44) MEDICAL INFORMATION (list student's illnesses, behavior, health issues, allergies, medications, or other physical limitations) <i>None</i>		
(45) FAMILY PHYSICIAN [REDACTED]	(46) PHYSICIAN PHONE [REDACTED]	(48) Does your child currently have health insurance? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, indicate: <input type="checkbox"/> Medicaid <input checked="" type="checkbox"/> Private <input type="checkbox"/> Healthy Kids/Kid Care <input type="checkbox"/> Interested in receiving information			
(47) HOSPITAL PREFERENCE <i>Palms West / Wellington</i>					

PARENT'S/GUARDIAN'S OTHER CHILDREN IN PALM BEACH COUNTY SCHOOLS

(49) NAME OF CHILD (first, middle, last)	SCHOOL ATTENDING	STUDENT NO. (optional)	GRADE	DATE OF BIRTH
(50) NAME OF CHILD (first, middle, last)	SCHOOL ATTENDING	STUDENT NO. (optional)	GRADE	DATE OF BIRTH
(51) NAME OF CHILD (first, middle, last)	SCHOOL ATTENDING	STUDENT NO. (optional)	GRADE	DATE OF BIRTH
(52) NAME OF CHILD (first, middle, last)	SCHOOL ATTENDING	STUDENT NO. (optional)	GRADE	DATE OF BIRTH

PARENT/GUARDIAN SIGNATURE I verify that the information given is true and accurate to the best of my knowledge. [REDACTED] <i>8-14-01</i> SIGNATURE OF PARENT/GUARDIAN DATE	FOR OFFICE USE ONLY						
	(53) SCH NO. 2331	(54) STUDENT NO. [REDACTED]	(55) COB US	(56) ENTRY CD. E01	(57) ENTRY DATE 08/14/01	(58) GR LV 09	(59) CAL 01
	(60) TEACHER NO.	(61) REASSIGN CODE	(62) TRANSPORTATION <input type="checkbox"/> PBC Bus # _____ <input type="checkbox"/> Palm Tran <input type="checkbox"/> Parent/Student Trans. <input type="checkbox"/> Walk <input type="checkbox"/> Bike			(63) BIRTH VERF. 1 2 3 4 5 6 7 8 9 T	(64) HRS A B Z
	(65) DOCUMENTATION CHECKLIST (check and date when received) <input type="checkbox"/> Immunizations (date) _____ <input type="checkbox"/> Birth Records Verif. (date) _____ <input type="checkbox"/> Soc. Sec. No. (date) _____ <input type="checkbox"/> Physical Exams (date) _____						
(66) DATA ENTRY COMPLETED BY					DATE		



FLORIDA CERTIFICATION OF IMMUNIZATION

Legal Authority: FLORIDA STATUTES 232.032, s. 10D-3.088, F.A.C. and s. 10M-12, F.A.C.

[REDACTED]	[REDACTED]		
LAST NAME	FIRST	MI	DOB MO/DA/YR
[REDACTED]	[REDACTED]		
PARENT OR GUARDIAN	Child's SS# (optional)	STATE IMMUNIZATION ID# ¹	

Directions:

- Enter all appropriate doses and dates below.
- Sign and date appropriate certificate (A-1, A-2, B, or C) on reverse side of form.
- If the child is presenting for the 7th grade requirement only and has previously filed a Certificate of Immunization (680A or 680A-1) with their current Florida school, fill in boxed areas below and complete Part A-2 on the reverse side of this form.
- For additional information: See Immunization Guidelines for School and Child Care Facilities for information and instructions on form completion and immunization requirements. Guidelines are updated annually and are available from the local county health department.

VACCINE	DOE CODE	Dose 1 MO/DA/YR	Dose 2 MO/DA/YR	Dose 3 MO/DA/YR	Dose 4 MO/DA/YR	Dose 5 MO/DA/YR
DTaP/DTP ²	A	[REDACTED]				
DT ³	B					
Td ⁴	C					
Polio ⁵	D					
HIB ⁶	E					
MMR (Combined) ⁷	F					
(Separate) ⁸	G, H, I					
Hepatitis B ⁹	J					

- 1 The state immunization ID# is an identifier supplied by the state immunization registry (optional).
- 2 DTP 5 doses required. If the fourth primary dose is administered on or after the fourth birthday a fifth dose is not required. DTaP is an acceptable alternative for one or more doses of DTP.
- 3 DT (pediatric) is acceptable if Pertussis vaccine is medically contraindicated. (Complete Part C for Pertussis contraindication.)
- 4 Td (Adult) Vaccine is recommended for children 7 years of age or older.
- 5 Polio 4 doses required. If the third dose is administered on or after the fourth birthday, a fourth dose is not required. IPV is an acceptable alternative for one or more doses of OPV. Polio vaccine is not required for children 18 years of age or older.
- 6 Hib is required for child care and preschool entry and attendance only.
- 7 1st dose valid if given on or after 1st birthday. Second dose (measles) valid if given at least 1 month after 1st dose.
A second dose of measles (preferably MMR) is required for students in grades K-4 in the 1997-98 school year, and 7th grade entry and attendance effective with the 1997/98 school year. In each subsequent year thereafter, the next highest grades are included.
- 8 Includes single measles vaccine (G), single mumps vaccine (H) or single rubella vaccine (I).
- 9 Hepatitis B vaccine series is required for seventh grade entry and attendance effective with the 1997-98 school year and kindergarten entry and attendance effective with the 1998-99 school year. In each subsequent year thereafter, the next highest grades are included.

LAST NAME

FIRST

MI

DOB (MO/DA/YR)

Certificate of Immunization for K-12 Excluding 7th Grade Requirements

PART A-1 (Immunizations are complete for school entry and attendance grades kindergarten through 12 with the exception of the 7th grade requirement.) DOE Code 1

I have reviewed the records available, and to the best of my knowledge, the above named child has been adequately immunized against diphtheria, tetanus, pertussis, polio, measles, mumps, rubella and hepatitis B (for kindergarten effective with the 1998/99 school year) for school attendance as documented on the reverse side of this form.

Physician or Clinic Name:
(Print or stamp)

Physician or
Authorized Signature:

Address:

Date:

Certificate of Immunization Supplement for 7th Grade Requirement

PART A-2 (Immunizations are complete for students who enter or attend the 7th grade after the beginning of the 1997/98 school year. Each subsequent year thereafter, the next highest grade will be included in the requirement.) DOE Code 8

I have reviewed the records available, and to the best of my knowledge, the above named child has received the following immunizations required for entry and attendance in 7th grade effective with the 1997/98 school year: tetanus-diphtheria booster, hepatitis B vaccine series, and second dose of measles vaccine as documented on the reverse side of this form (boxed area)

Physician or Clinic Name:
(Print or stamp)

Physician or
Authorized Signature:

Address:

Date:

M.D.
Royal Palm Beach, FL 33411
Lic. #

5-12-00

Temporary Medical Exemption

PART B (For preschool children, children in day care and school children who are incomplete for immunizations in Part A-1 or A-2.) Invalid without expiration date. DOE Code 2

I certify that the above named child has received the immunizations documented on the reverse side of this form and has commenced a schedule to complete the required immunizations. Additional immunizations are not medically indicated at this time.

Physician or Clinic Name:
(Print or stamp)

Expiration Date:
(15 days after next immunization appointment)

Address:

Physician or
Authorized Signature:

Date:

Permanent Medical Exemption

PART C For medically contraindicated immunizations, list each vaccine and state valid clinical reasoning or evidence for exemption: DOE Code 3

I certify that the physical condition of this child is such that immunization(s) as indicated in Part C above is medically contraindicated.

Physician or Clinic Name:
(Print or stamp)

Physician Signature:

Address:

Date:

PANEL: _____

A10. CURRENT SCHEDULE

YEAR: 99

Tuesday January 12, 1999 11:21 am

STDT: [REDACTED]

SCHL: 1691 GR: 06 ST: A
HMRM: TM: 6A

ST: A T: _____ SY: 99

A	COURSE	SEC	DATE	SCHL	T	PRDS		DAYS	BLD-RM	TCHR	ST.
—	1205010	01	081998	3	0101	M/J MATH 1		MTWRF	00P21	[REDACTED]	
—	2002040	02	081998	3	0202	M/J COMP SCI 1		MTWRF	00P19	[REDACTED]	
—	2103030	03	081998	3	0303	M/J GEOG:AS, OC, AF		MTWRF	00P20	[REDACTED]	
—	10080104	14	081998	1	0404	M/J READ 1		MTWRF	00602	[REDACTED]	
—	8200110	34	012099	8	0404	BUS KEYBOARDING		MTWRF	00824	[REDACTED]	
—	1001010	04	081998	3	0505	M/J LANG ARTS 1		MTWRF	00P17	[REDACTED]	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	
—	_____	_____	_____	_____	_____	_____		_____	_____	_____	

PF1=HELP 3=EXIT 4=PROMPT 5=REFRESH 6=FORCE 7=BKWD 8=FWD 9=NXT 11=PRT 12=ESCAPE
 NO ADDITIONAL PAGES...NEXT? PORT: _____
 TERML: CB1B

Name _____

STUDENT RECORD FOLDER

COMPOSITION

Grades 3-6



PALM BEACH COUNTY PUBLIC SCHOOLS

GRADE 3

INTEGRATED COMPOSITION

Fall Testing

School _____
 Teacher _____
 Date 9.6.95 Rank 2+

The student needs further work on:

- Response to Prompt
- Audience
- Development
- Organization/Sequence
- Details
- Vocabulary
- Sentence Structure
- Grammar
- Mechanics

Spring Testing

School _____
 Teacher _____
 Date 5.13 Rank 3+

The student needs further work on:

- Response to Prompt
- Audience
- Development
- Organization/Sequence
- Details
- Vocabulary
- Sentence Structure
- Grammar
- Mechanics

UNIT EVALUATIONS

UNIT ONE	— Photo Story	Date _____	Rank _____
UNIT TWO	— Journal Entry	Date <u>11.10.95</u>	Rank _____
UNIT THREE	— How-To Report	Date <u>1.12.96</u>	Rank _____
UNIT FOUR	— Friendly Letter	Date <u>12.14.95</u>	Rank _____
UNIT FIVE	— Story Ending	Date <u>10.10.95</u>	Rank _____
UNIT SIX	— News Story	Date _____	Rank _____
UNIT SEVEN	— Book Report	Date _____	Rank _____
UNIT EIGHT	— Descriptive Paragraph	Date _____	Rank _____

RANK: 4 - Outstanding 3 - Reasonable 2 - Minimal 1 - Insufficient



THE SCHOOL BOARD OF PALM BEACH COUNTY
PALM BEACH COUNTY, FLORIDA

KINDERGARTEN REPORT CARD

Year 19 92 - 93

Student: [Redacted]
 Teacher: [Redacted]
 School: [Redacted]
 Principal: [Redacted]

**KINDERGARTEN CHECKLIST
MARKING CODES**

- formal instruction has not yet begun
- student receiving formal instruction to meet specific needs and experiencing difficulty with skill
- student receiving formal instruction and making satisfactory progress
- student consistently performs skill accurately and efficiently

The asterisks (*) indicate critical skills.

CENTRAL PROCESSING		LANGUAGE	
	2nd 3rd 4th		2nd 3rd 4th
BODY IMAGE		LISTENING	
Imitates Body Movements 1.1	[Redacted]	Recalls Information 9.1	[Redacted]
Identifies Body Parts 1.2	[Redacted]	Predicts Outcome 9.2	[Redacted]
Assembles Body Parts 1.3	[Redacted]	*Retells Story 9.3	[Redacted]
GROSS MOTOR		SPEAKING	
Creeps 2.1	[Redacted]	*States Full Name 10.1	[Redacted]
Runs 2.2	[Redacted]	Describes Common Objects 10.2	[Redacted]
Jumps 2.3	[Redacted]	Uses Complete Sentences with Proper Speech Patterns 10.3	[Redacted]
Hops 2.4	[Redacted]	PREREADING	
Balances 2.5	[Redacted]	Interprets Pictures 11.1	[Redacted]
Gallops 2.6	[Redacted]	Recognizes Labels 11.2	[Redacted]
Bounces/Catches Ball 2.7	[Redacted]	*Recognizes Own Name 11.3	[Redacted]
HAPTIC		*Illustrates Story 11.4	[Redacted]
Moves Through Obstacle Course 3.1	[Redacted]	*Recognizes Letters 11.5	[Redacted]
Follows Commands Using Body 3.2	[Redacted]	PREWRITING	
Identifies Objects by Touch 3.3	[Redacted]	*Demonstrates Mastery of Fine Motor Skills 12.1	[Redacted]
Sorts/Matches Objects by Touch 3.4	[Redacted]	*Reproduces First Name 12.2	[Redacted]
FINE MOTOR/EYE HAND		ENVIRONMENTAL AWARENESS	
Strings Beads 4.1	[Redacted]		2nd 3rd 4th
Assembles Puzzle 4.2	[Redacted]	Observes Accurately 13.1	[Redacted]
Copies Shapes 4.3	[Redacted]	Makes Comparisons 13.2	[Redacted]
Matches/Pastes Shapes 4.4	[Redacted]	Predicts Outcomes 13.3	[Redacted]
Cuts Circle 4.5	[Redacted]	Phrases Significant Questions 13.4	[Redacted]
Colors Objects 4.6	[Redacted]	MATHEMATICS	
Sequences Fingers 4.7	[Redacted]		2nd 3rd 4th
VISUAL DISCRIMINATION		NUMERATION	
Sorts by Color 5.1	[Redacted]	*Matches One-to-One 14.1	[Redacted]
Sorts by Shape 5.2	[Redacted]	*Names Numerals 0-10 14.2	[Redacted]
Sorts by Size 5.3	[Redacted]	*Matches Sets and Numerals to 10 14.3	[Redacted]
Matches Pictures 5.4	[Redacted]	*Identifies Ordinal Position 14.4	[Redacted]
*Identifies Likenesses/Differences of Numbers 5.5	[Redacted]	FRACTIONS	
*Identifies Objects by Relationships 5.6	[Redacted]	*Identifies One-Half 15.1	[Redacted]
*Identifies Likenesses/Differences of Letters 5.7	[Redacted]	GEOMETRY	
Identifies Size Relationships 5.8	[Redacted]	*Identifies Shapes 16.1	[Redacted]
VISUAL MEMORY		MEASUREMENT	
*Recalls Colors 6.1	[Redacted]	Compares Objects 17.1	[Redacted]
Sequences Shapes 6.2	[Redacted]	*Orders Objects 17.2	[Redacted]
*Sequences Numbers 6.3	[Redacted]	*Identifies Use of Measurement Tools 17.3	[Redacted]
*Sequences Letters 6.4	[Redacted]	Measures Objects 17.4	[Redacted]
AUDITORY DISCRIMINATION		SPECIAL TOPICS	
Names Sounds 7.1	[Redacted]	Identifies Coins 18.1	[Redacted]
*Identifies Likenesses/Differences of Words 7.2	[Redacted]	States Values of Coins 18.2	[Redacted]
Identifies Rhyming Words 7.3	[Redacted]	Joins/Separates Sets 18.3	[Redacted]
Identifies Likenesses/Differences of Sounds 7.4	[Redacted]		
AUDITORY MEMORY			
Repeats Sound Pattern 8.1	[Redacted]		
Repeats Sentence 8.2	[Redacted]		
*Sequences Numerals 8.3	[Redacted]		
*Follows Directions 8.4	[Redacted]		
*Sequences Letters 8.5	[Redacted]		

**NONACADEMIC BEHAVIOR
GRADES K-5**

This grade reflects the student's overall conduct in all school activities.

- 4 = Very Good
- 3 = Good
- 2 = Fair Parent conference requested.
- 1 = Poor Parent conference requested.

Marking Period

1st	2nd	3rd	4th
-----	-----	-----	-----

Nonacademic Behavior

[Redacted]	[Redacted]	[Redacted]	[Redacted]
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ATTENDANCE

Regular attendance and punctuality are essential for quality education.

Marking Period

1st	2nd	3rd	4th
-----	-----	-----	-----

Days Present	38	45	43	45
Days Absent	2	5	1	1
Days Tardy	7	5	3	17
INFORMATION INCLUDED	✓	✓	✓	
TEACHER REQUESTS CONFERENCE		✓	✓	

***PLACEMENT**

Grade 1 Summer School Program _____

*If summer school program is indicated, grade placement will be determined by the home school.

- 1.3 to order whole numbers and decimals
- 1.4 to add and subtract whole numbers up to 6 digits
- 1.5 to round whole numbers and decimals
- 1.6 to add and subtract decimals through thousandths
- 1.7 to solve related problems in realistic settings
- 2.1 to evaluate addition and subtraction expressions
- 2.2 to write addition, subtraction, and multiplication expressions
- 2.3 to find the least common multiple of two or three numbers
- 2.4 to find products of 2- and 3-digit multiplicands and 1-, 2-, and 3-digit multipliers
- 2.5 to solve related problems in realistic settings
- 3.1 to evaluate basic fact expressions
- 3.2 to divide by 1-digit divisors
- 3.3 to divide by 2-digit divisors
- 3.4 to find the prime factorization of a number
- 3.5 to find the greatest common factor of two or three numbers
- 3.6 to solve related problems in realistic settings
- 4.1 to find the mean, median, and range of a set of data
- 4.2 to analyze data in line graphs
- 4.3 to analyze data in double-bar graphs and double-line graphs
- 4.4 to analyze data in circle graphs using fractions
- 4.5 to solve related problems in realistic settings
- 5.1 to give the length of an object
- 5.2 to find the perimeter of a regular or irregular polygon
- 5.3 to add and subtract units of time to find elapsed time
- 5.4 to compare times in different U.S. time zones.
- 5.5 to solve related problems in realistic settings
- 6.1 to multiply decimals through tenths by whole numbers
- 6.2 to multiply decimals through thousandths by whole numbers
- 6.3 to multiply decimals by decimals
- 6.4 to multiply money amounts by whole numbers and decimals
- 6.5 to solve related problems in realistic settings
- 7.1 to divide a decimal by a 1-digit whole number with quotients to thousands
- 7.2 to write zeros as place holders in decimal quotients
- 7.3 to estimate and divide a money amount by a whole number
- 7.4 to mentally divide a whole number by a whole number, with a decimal quotient
- 7.5 to solve related problems in realistic settings
- 8.1 to classify quadrilaterals by appearance
- 8.2 to recognize the congruency of corresponding parts of a figure and its slide, flip, or turn image
- 8.3 to identify figures with line and/or turn symmetry
- 8.4 to classify triangles as equilateral, isosceles, or scalene
- 8.5 to associate ordered pairs of whole numbers with points on a grid
- 8.6 to solve related problems in realistic settings
- 9.1 to write equivalent fractions and fractions in simplest form
- 9.2 to write mixed numbers and whole number as fractions greater than one and vice versa
- 9.3 to compare and order fractions and mixed numbers
- 9.4 to solve related problems in realistic settings
- 10.1 to add or subtract fractions with like denominators
- 10.2 to add or subtract fractions with unlike denominators
- 10.3 to add or subtract mixed numbers with like or unlike denominators, no regrouping
- 10.4 to subtract mixed numbers with like or unlike denominators, requiring regrouping
- 10.5 to solve related problems in realistic settings
- 11.1 to multiply fractions by whole numbers
- 11.2 to multiply fractions by fractions

- 12.2 to determine whether two ratios are equal
- 12.3 to find a missing term given a pair of equal ratios
- 12.4 to write a percent as a fraction or decimal and vice versa
- 12.5 to find a percent of a number
- 12.6 to write a probability ratio for a situation involving equally likely events
- 12.7 to solve related problems in realistic settings
- 13.1 to find the areas of rectangles and squares
- 13.2 to identify the number of bases, other faces, edges, and vertices in prisms and pyramids
- 13.3 to find the volumes of rectangular prisms
- 13.4 to solve related problems in realistic settings

Teacher: _____
 Comments: _____

Level 6

- 1.1 to identify the value of a digit by its place in a whole number or decimal
- 1.2 to round whole numbers and decimals
- 1.3 to add and subtract decimals through ten thousandths
- 1.4 to write one-variable addition or subtraction expressions involving whole numbers
- 1.5 to solve related problems in realistic settings
- 2.1 to evaluate one-variable multiplication expressions
- 2.2 to solve multiplication equations
- 2.3 to find the least common multiple of two numbers
- 2.4 to multiply whole numbers by 2-digit multipliers
- 2.5 to multiply decimals by whole numbers
- 2.6 to multiply decimals by decimals
- 2.7 to solve related problems in realistic settings
- 3.1 to solve division equations
- 3.2 to simplify numerical expressions using the order of operations
- 3.3 to divide by a 1- or 2-digit divisor
- 3.4 to find the prime factorization of a number
- 3.5 to find the greatest common factor of two numbers
- 3.6 to solve related problems in realistic settings
- 4.1 to interpret line plots
- 4.2 to find and use mean, median, mode, and range to describe data
- 4.3 to analyze data in bar graphs
- 4.4 to analyze data in line graphs
- 4.5 to analyze data in circle graphs
- 5.1 to divide a whole number by a smaller or larger whole number
- 5.2 to divide a money amount by a whole number
- 5.3 to divide a decimal by a decimal
- 5.4 to round decimals
- 5.5 to estimate unit prices to determine the better buy
- 5.6 to solve related problems in realistic settings
- 6.1 to write equivalent customary units
- 6.2 to write equivalent metric units
- 6.3 to classify angles as acute, right, obtuse, or straight
- 6.4 to find the circumference of a circle
- 6.5 to construct a circle graph and to identify terms related to circles
- 6.6 to solve related problems in realistic settings
- 7.1 to write fractions greater than 1 as mixed numbers and vice versa
- 7.2 to add and subtract fractions and mixed numbers with like denominators
- 7.3 to compare and order fractions with like and unlike denominators
- 7.4 to mentally add and subtract fractions and mixed numbers in which one denominator is a multiple of the other
- 7.5 to add or subtract customary measures
- 7.6 to add and subtract fractions and mixed numbers with unlike denominators in which neither is a multiple of the other
- 7.7 to solve related problems in realistic settings
- 8.1 to multiply fractions and whole numbers

- 8.5 to divide when one or both numbers are numbers
- 8.6 to change fractions and mixed numbers, decimals and vice versa
- 8.7 to solve related problems in realistic settings
- 9.1 to write a ratio in three different ways
- 9.2 to determine whether two ratios are equal
- 9.3 to find missing terms in proportions
- 9.4 to identify the correct proportion for a given word problem
- 9.5 to write the probability of events among equally likely outcomes
- 9.6 to solve related problems in realistic settings
- 10.1 to identify congruent and parallel parts given a figure and its slide or flip image
- 10.2 to identify congruent and parallel parts given a figure and its $\frac{1}{2}$, $\frac{1}{4}$, or $\frac{1}{8}$ turn image
- 10.3 to identify figures as having turn and/or line symmetry
- 10.4 to write the ordered pair for a given point on a grid
- 10.5 to classify pictures of geometric solids
- 10.6 to solve related problems in realistic settings
- 11.1 to write a percent for the shaded portion of a figure
- 11.2 to write fractions and decimals as percents
- 11.3 to compute a percent of a number
- 11.4 to compute sale price given the original price and discount rate
- 11.5 to compute total cost given the price and tax rate
- 11.6 to compute annual interest given the principal and interest rate
- 11.7 to solve related problems in realistic settings
- 12.1 to find the area of a rectangle or triangle shown on a geoboard
- 12.2 to find the area and perimeter of a triangle
- 12.3 to find the area of a parallelogram
- 12.4 to find the approximate area of a circle
- 12.5 to find the volume of a rectangular prism
- 12.6 to solve related problems in realistic settings
- 13.1 to write new temperatures given drops or increases from given temperatures
- 13.2 to order signed numbers
- 13.3 to add two signed numbers with unlike signs
- 13.4 to subtract a larger whole number from a smaller one
- 13.5 to calculate elapsed time
- 13.6 to solve related problems in realistic settings

Teacher: _____
 Comments: _____

Level 7

- 1.1 to round whole numbers and decimals
- 1.2 to add and subtract decimals
- 1.3 to write variable expressions
- 1.4 to write 1-step addition or subtraction equations for related problems
- 1.5 to solve 1-step addition or subtraction equations
- 2.1 to solve one-step multiplication or division equations
- 2.2 to simplify, evaluate, compare, and order exponential expressions
- 2.3 to find the least common multiple of 2 or 3 numbers
- 2.4 to solve 2-step equations
- 2.5 to solve related problems by writing linear equations
- 3.1 to evaluate simple multiplication expressions with decimal replacements
- 3.2 to multiply decimals by decimals and by whole numbers
- 3.3 to divide decimals by whole numbers and by decimals
- 3.4 to compare prices to determine the best buy
- 3.5 to write and multiply numbers in scientific notation
- 3.6 to solve related problems in realistic settings

- 4.5 to analyze data in circle graphs
- 5.1 to determine precision and greatest possible error of a linear measurement
- 5.2 to multiply and divide whole numbers by whole numbers
- 5.3 to identify different types of angles and pairs of angles
- 5.4 to plan and interpret a circle graph
- 5.5 to solve related problems in realistic settings
- 6.1 to compare two fractions
- 6.2 to order fractions from least to greatest
- 6.3 to add and subtract fractions with unlike denominators
- 6.4 to solve equations with fractions
- 6.5 to add and subtract mixed numbers, fractions, or whole numbers
- 6.6 to solve related problem in realistic settings
- 7.1 to multiply fractions and mixed numbers
- 7.2 to write and use the reciprocals of fractions and whole numbers
- 7.3 to divide fractions and mixed numbers
- 7.4 to write a fraction or mixed number as a decimal and vice versa
- 7.5 to solve 1- and 2-step equations with fractions and mixed numbers
- 7.6 to solve related problems in realistic settings
- 8.1 to add signed numbers
- 8.2 to subtract signed numbers
- 8.3 to multiply and divide signed numbers
- 8.4 to identify equivalent forms of signed numbers
- 8.5 to solve 1- and 2-step equations with signed numbers
- 8.6 to write the inequality for a given graph
- 8.7 to solve related problems in realistic settings
- 9.1 to use the scale of a map or scale drawing
- 9.2 to find a percent of a number
- 9.3 to find the percent when the base and percentage are given
- 9.4 to find the base when a percent of it is known
- 9.5 to find simple interest
- 9.6 to calculate percent of increase or decrease
- 9.7 to solve related problems in realistic settings
- 10.1 to recognize translation, reflection and turn images of figures
- 10.2 to identify the medians and altitudes in triangles
- 10.3 to use transformations to identify congruent line segments and angles given in a figure and its turn image
- 10.4 to identify the scale factor in two similar triangles given their dimensions
- 10.5 to identify perpendicular, parallel, and skew edges of a right rectangular prism
- 10.6 to solve related problems in realistic settings
- 11.1 to calculate perimeter and area of parallelograms
- 11.2 to calculate perimeter and area of triangles
- 11.3 to calculate perimeter and area of trapezoids
- 11.4 to calculate the area of a circle
- 11.5 to calculate the volumes of prisms, cylinders, cones, and pyramids
- 11.6 to calculate the surface area of prisms and cylinders
- 11.7 to solve related problems in realistic settings
- 12.1 to solve one-step inequalities
- 12.2 to find and graph ordered pairs
- 12.3 to write the coordinates for a translation image of a given point
- 12.4 to write the coordinates for a reflection image of a given point
- 12.5 to write the coordinates for a half-turn image of a given point
- 12.6 to solve related problems in realistic settings
- 13.1 to calculate the probability of an event among equally likely outcomes

- 13.4 to calculate the odds of an event among equally likely outcomes
- 13.5 to determine the probability of two events
- 13.6 to predict the probability of an event when outcomes are not equally likely
- 13.7 to use a random number table to solve problems

Teacher: _____

Comments: _____

Level 8

- 1.1 to identify elements of the commutative, associative, and zero properties for addition
- 1.2 to write a variable equation for a table or a problem situation
- 1.3 to determine whether two or more equations are equivalent
- 1.4 to solve one-step addition and subtraction equations in one variable
- 1.5 to determine whether an inequality is true or false for given values of the variable
- 1.6 to solve related problems in realistic settings
- 2.1 to simplify computation by using the properties of multiplication
- 2.2 to multiply and divide decimals
- 2.3 to evaluate expressions involving order of operations including exponents
- 2.4 to solve multiplication and division equations
- 2.5 to solve two-step equations in one variable
- 2.6 to solve related problems in realistic settings
- 3.1 to interpret data presented in a line plot
- 3.2 to interpret data presented in a stem-and-leaf plot
- 3.3 to interpret data presented in a frequency histogram
- 3.4 to find the upper and lower quartiles for a stem-and-leaf plot
- 3.5 to find the median and quartiles from a box plot
- 3.6 to solve related problems in realistic settings
- 4.1 to identify in a diagram a radius, diameter, semicircle, major arc, and minor arc
- 4.2 to find the distance in nautical miles between two locations on earth given their central angle
- 4.3 to find the length of an arc of a circle given the measure of its central angles and the radius of the circle
- 4.4 to recognize lines of symmetry in different figures
- 4.5 to recognize concave, convex, and regular polygons
- 4.6 to solve related problems in realistic settings
- 5.1 to compare and order fractions and mixed numbers
- 5.2 to add and subtract fractions and mixed numbers
- 5.3 to multiply fractions and mixed numbers
- 5.4 to divide fractions and mixed numbers
- 5.5 to solve one- and two-step equations containing fractions
- 5.6 to solve related problems in realistic settings
- 6.1 to compare two signed numbers
- 6.2 to add two signed numbers
- 6.3 to subtract two signed numbers
- 6.4 to multiply two signed numbers
- 6.5 to divide two signed numbers
- 6.6 to solve one- and two-step equations involving signed numbers
- 6.7 to solve related problems in realistic settings
- 7.1 to write expressions using positive exponents with negative exponents, and vice versa

- 7.4 to find the squares and square roots of numbers
- 7.5 to write terminating and repeating decimals as the ratio of two integers
- 7.6 to solve related problems in realistic settings
- 8.1 to write and use proportions to solve problems
- 8.2 to use ratios of equivalent measures to convert from one customary unit to another
- 8.3 to find the percent, percentage, or base when the other two are given
- 8.4 to compute simple and compound interest
- 8.5 to compute commission, sales tax, discounts, and markups
- 8.6 to use the consumer price index to estimate changes in price
- 8.7 to solve related problems in realistic settings
- 9.1 to simplify expressions by combining like terms
- 9.2 to solve equations containing like terms
- 9.3 to simplify expressions by using the distributive property
- 9.4 to solve equations that apply the distributive property
- 9.5 to solve and graph the solution set for 1- and 2-step inequalities
- 9.6 to write equations or inequalities for stated relationships
- 9.7 to solve related problems in realistic settings
- 10.1 to identify images as translations, reflections, and rotations of figures
- 10.2 to identify congruent sides and angles in a figure and its image
- 10.3 to identify angles relationships given two parallel lines and a transversal
- 10.4 to find the length of one side of a right triangle given the lengths of the other two sides
- 10.5 to apply properties of similar figures
- 10.6 to solve related problems in realistic settings
- 11.1 to find the area of a trapezoid
- 11.2 to find the area of a circle
- 11.3 to find the surface area of a prism or pyramid
- 11.4 to find the surface area of a cylinder
- 11.5 to find the volume of a prism or cylinder
- 11.6 to find the volume, capacity, and mass of water in a container given its metric dimensions
- 11.7 to solve related problems in realistic settings
- 12.1 to give the coordinates of the vertices of an image triangle after a reflection or half-turn
- 12.2 to give the coordinates of the vertices of an image triangle resulting from a translation
- 12.3 to list the ordered pairs that belong to a given relation
- 12.4 to determine whether a relation is a function
- 12.5 to make a graph to solve a system of linear equations
- 12.6 to solve related problems in realistic settings
- 13.1 to determine the theoretical probability of equally-likely events
- 13.2 to determine the theoretical probability of the occurrence of either of two mutually exclusive events
- 13.3 to determine the theoretical probability of the occurrence of both of two independent events
- 13.4 to determine the theoretical probability of the occurrence of both of two dependent events
- 13.5 to determine the number of combinations and permutations possible for a given set of objects
- 13.6 to solve related problems in realistic settings

Teacher: _____

Comments: _____



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 Lexington, Massachusetts / Toronto
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Level K

- 1.1 identify, describe, and place an object in a specific location: above, below, next to, top, bottom, on or off
- 1.2 describe an object as being left or right of another object
- 1.3 physically represent movement along given open and closed paths
- 1.4 describe an object in a specific location using positional terms
- 2.1 identify an object that is different from other objects
- 2.2 identify and describe an object that is the same as or different from another object in one or more ways
- 2.3 sort objects into groups on the basis of their use
- 2.4 identify and continue linear patterns using objects and pictures of objects with multiple attributes
- 2.5 select a specific object from a given group of objects using the process of elimination and logical thinking
- 3.1 use one-to-one matching to determine if two groups are equal or not equal in number
- 3.2 construct a group equal in number to a given group
- 3.3 use representations to compare and order more than two groups
- 3.4 use tally marks to represent symbolically the number of objects in a group
- 4.1 identify two-dimensional shapes as faces of three dimensional figures
- 4.2 create a single whole shape from given parts
- 4.3 create patterns of two- and three-dimensional objects using positional, locational, and directional relationships
- 4.4 identify the stated figure in different orientations
- 5.1 identify a given numeral (0-5) to represent the quantity of a given group
- 5.2 write numerals from 0 to 5
- 5.3 use ordinal words first through fifth
- 5.4 solve simple verbal problems involving subtraction
- 6.1 choose the longest or shortest object from a group of objects
- 6.2 order more than two objects on the basis of length
- 6.3 identify, continue and create a pattern with regard to length and orientation
- 6.4 use physical and pictorial representations to compare and order lengths
- 7.1 identify symmetry
- 7.2 cover an area with congruent figures
- 7.3 identify and illustrate slides
- 7.4 identify and illustrate turns
- 8.1 identify a group of a given size with a numeral 6-10
- 8.2 identify and continue a numerical pattern
- 8.3 order two or more numbers
- 8.4 use ordinal words first through tenth
- 8.5 equalize groups
- 8.6 solve simple problems involving addition and subtraction
- 9.1 use physical and pictorial representations to compare and order two figures on the basis of area
- 9.2 recognize that the area of a figure is the same as the total area of its components
- 9.3 identify a pictorial representation of a weight comparison
- 9.4 order more than two objects on the basis of weight
- 9.5 compare and order containers on the basis of capacity
- 10.1 read and write the numerals 11-20
- 10.2 construct a group of a specified size
- 10.3 solve simple problems involving addition and subtraction (0-10)
- 11.1 describe a single event in terms of its occurrence, daytime or nighttime

- 11.3 tell time to the hour
- 11.4 match a group of coins to a price tag
- 11.5 describe an event in terms of its chance of happening
- 11.6 discuss the 12 months of the year
- 11.7 describe the weather characteristics of each of the four seasons
- 12.1 identify objects and figures with equal parts
- 12.2 use the attributes of length and area to divide objects and figures into halves, thirds, or fourths
- 12.3 use the attributes of length, weight, and area to solve simple grouping problems
- 12.4 solve simple problems involving grouping and partitioning
- 12.5 use a calculator to create number patterns

Teacher: _____

Comments: _____

Level I

- 1.1 to count 1-20 objects
- 1.2 to write numerals 1-20
- 1.3 to determine which number is larger or smaller and which set of objects contains more or fewer
- 1.4 to count how many objects in a collection have a given attribute
- 1.5 to order numbers
- 1.6 to solve related problems in a realistic setting
- 2.1 to find how many in all using pictures of objects
- 2.2 to add zero to a number
- 2.3 to find sums through 6
- 2.4 to find the sum of pennies in two pictured groups
- 2.5 to write addition number sentences
- 2.6 to solve related problems in realistic settings
- 3.1 to solve subtraction facts through 6
- 3.2 to subtract to compare groups
- 3.3 to solve related problems by writing number sentences or subtraction facts
- 4.1 to write addition facts through 10 for pictures
- 4.2 to find how many are left in a group
- 4.3 to write subtraction facts through 10 for pictures
- 4.4 to complete addition and subtraction fact families
- 4.5 to solve related addition and subtraction fact families
- 5.1 to count up to 100 objects and write the numeral
- 5.2 to compare two numbers, 0 through 99
- 5.3 to order numbers to 99
- 5.4 to identify ordinal positions, through tenths
- 5.5 to solve related problems in realistic settings
- 6.1 to identify and order the days of the week
- 6.2 to read and write time to the hour or half hour
- 6.3 to count and write the value of a collection of coins
- 6.4 to determine whether there is enough money in a collection of coins
- 6.5 to solve related problems in realistic settings
- 7.1 to add three 1-digit numbers with sums to 12
- 7.2 to write addition sentences for pictures
- 7.3 to write subtraction sentences for pictures
- 7.4 to solve subtraction facts through 12
- 7.5 to complete addition and subtraction fact families
- 7.6 to solve related problems in realistic settings
- 8.1 to draw a figure with a given number of sides or corners
- 8.2 to identify figures that have a line of symmetry
- 8.3 to identify figures divided into equal parts
- 8.4 to color $\frac{1}{2}$, $\frac{1}{3}$, or $\frac{1}{4}$ of a plane figure
- 8.5 to solve related problems in realistic settings
- 9.1 to solve addition facts through 20
- 9.2 to solve subtraction facts through 20

- 9.4 to complete addition and subtraction fact families
- 9.5 to solve related problems in realistic settings
- 10.1 to measure lengths in inches and centimeters
- 10.2 to estimate which of two pictured objects is heavier
- 10.3 to choose the appropriate thermometer for pictured clothing or weather
- 10.4 to choose the correct measuring tool
- 10.5 to solve related problems in realistic settings
- 11.1 to find how many in all given several equal sets
- 11.2 to find how many sets can be made from a set of objects
- 11.3 to find how many are in $\frac{1}{2}$, $\frac{1}{3}$, or $\frac{1}{4}$ of a set
- 11.4 to separate a group of objects into equal sets, identifying how many in each set and how many left over
- 11.5 to solve related problems in realistic settings
- 12.1 to add a 1- or 2-digit number to a 2-digit number
- 12.2 to subtract a 1- or 2-digit number from a 2-digit number
- 12.3 to solve related problems in realistic settings

Teacher: _____

Comments: _____

Level 2

- 1.1 to count up to 20 objects in a set
- 1.2 to write the numerals 0-20
- 1.3 to compare two numerals or two sets of objects
- 1.4 to recognize a pattern and continue or complete it
- 1.5 to solve related problems in realistic settings
- 2.1 to add two or three 1-digit numbers with sums to 12
- 2.2 to find missing addends
- 2.3 to solve subtraction facts through 12
- 2.4 to complete addition and subtraction fact families
- 2.5 to solve related problems in realistic settings by finding how many fewer or more by subtraction
- 3.1 to count objects and write how many tens and ones
- 3.2 to write a number up to 100 in different forms
- 3.3 to compare two numbers up to 100 using <, >, or =
- 3.4 to write a sequence of numbers up to 100 in order
- 3.5 to identify numbers as odd or even
- 3.6 to identify objects in a picture by their ordinal names
- 3.7 to solve related problems in realistic settings
- 4.1 to solve addition facts through 20
- 4.2 to add three addends with sums to 20
- 4.3 to solve subtraction facts through 20
- 4.4 to complete addition and subtraction fact families
- 4.5 to solve related problems in realistic settings
- 5.1 to tell time from an analog clock
- 5.2 to sequence events in order
- 5.3 to know the months of the year in sequence
- 5.4 to count combinations of coins
- 5.5 to solve related problems by telling how much time has elapsed
- 6.1 to add multiples of ten to multiples of five or ten
- 6.2 to add a 2-digit number to a 1- or 2-digit number
- 6.3 to add money amounts
- 6.4 to add three 2-digit addends
- 6.5 to solve related problems in realistic settings
- 7.1 to recognize solids in pictures
- 7.2 to recognize attributes of plane figures (the sides and corners)

- 7.6 to solve related problems in realistic settings
- 8.1 to subtract tens
- 8.2 to subtract multiples of fives and tens from multiples of fives and tens
- 8.3 to subtract a 1- or 2-digit number from a 2-digit number
- 8.4 to subtract a 1- or 2-digit money amount from a 2-digit money amount
- 8.5 to solve related problems in realistic settings
- 9.1 to measure the length of an object using an inch ruler
- 9.2 to estimate the weights of familiar objects as less than, about, or more than a pound
- 9.3 to compare capacities measured in customary units
- 9.4 to measure the length of an object using a centimeter ruler
- 9.5 to estimate capacities of familiar containers as less than, about, or more than a liter
- 9.6 to solve related problems in realistic settings
- 10.1 to complete addition sentences for equal sets
- 10.2 to complete multiplication sentences for equal sets
- 10.3 to solve multiplication facts through 6
- 10.4 to find how many sets of a given size can be made from a pictured set, and how many will be left over
- 10.5 to solve related problems in realistic settings
- 11.1 to identify the number of ones, tens, and hundreds in a 3-digit number
- 11.2 to write in standard form a 3-digit number shown in expanded form
- 11.3 to compare 3-digit numbers using $<$ and $>$
- 11.4 to continue a sequence of 3-digit numbers with a common difference of 1, 5, 10, 50, or 100
- 11.5 to solve related problems in realistic settings
- 12.1 to add two 3-digit numbers with no regrouping
- 12.2 to add a 2- or 3-digit number to a 3-digit number with regrouping
- 12.3 to subtract two 3-digit numbers with no regrouping
- 12.4 to subtract a 2- or 3-digit number from a 3-digit number with regrouping
- 12.5 to add or subtract 2- or 3-digit money amounts
- 12.6 to solve related problems in realistic settings

Teacher: _____
 Comments: _____

Level 3

- 1.1 to order numbers
- 1.2 to use doubles plus and minus one to find sums to 20
- 1.3 to add three or more 1-digit numbers
- 1.4 to subtract a 1-digit number from a number to 20
- 1.5 to find missing addends
- 1.6 to identify and use addition and subtraction fact families
- 1.7 to solve related problems in realistic settings
- 2.1 to rewrite a number expressed in standard, expanded or word form in either of the other form
- 2.2 to order whole numbers
- 2.3 to write the value of a collection of bills and coins
- 2.4 to make change for amounts up to \$2.00
- 2.5 to write the time as shown on an analog clock
- 2.6 to solve related problems in realistic settings
- 3.1 to add 2- or 3-digit addends
- 3.2 to add up to four 2- or 3-digit addends
- 3.3 to subtract 2- and 3-digit numbers from 2- and 3-digit numbers
- 3.4 to subtract 3-digit numbers from 3-digit numbers with zeros
- 3.5 to solve related problems in realistic settings
- 4.1 to read pictographs
- 4.2 to read horizontal and vertical bar graphs
- 4.3 to solve related problems by reading data in a line graph
- 5.1 to multiply and/or divide with 2
- 5.2 to multiply and/or divide with 3

- 6.1 to solve related problems in realistic settings
- 6.2 to find missing factors
- 6.3 to complete fact families for multiplication or division sentences
- 6.4 to solve multiplication and division facts with 6, 7, 8, and 9
- 7.1 to solve related problems in realistic settings
- 7.2 to identify examples of slides, flips, and half turns by position, shape, and size
- 7.3 to classify angles as smaller than, equal to, or greater than a right angle
- 7.4 to draw lines of symmetry in a figure
- 7.5 to associate an ordered pair of letters and numbers with a specific square on a grid
- 8.1 to solve related problems in realistic settings
- 8.2 to write fractions for shaded figures
- 8.3 to write mixed numbers for two or more shaded figures divided into equal parts
- 8.4 to read an analog clock and write the time using a fraction
- 9.1 to solve related problems in realistic settings
- 9.2 to measure a line segment to the nearest inch, half inch, or centimeter
- 9.3 to find the perimeter of a polygon
- 9.4 to choose the better customary or metric unit for a given measurement
- 9.5 to compare two measures in unlike customary units
- 9.6 to read time to the minute from an analog clock
- 10.1 to solve related problems in realistic settings
- 10.2 to write tenths decimals for fractions, mixed numbers, and word names
- 10.3 to compare tenths decimals using $<$, $>$, and $=$
- 10.4 to order up to 4 tenths decimals
- 10.5 to add and subtract 2 tenths decimals
- 10.6 to solve related problems in realistic settings
- 11.1 to multiply 2-digit multiplicands by 1-digit multipliers
- 11.2 to multiply three 1-digit factors
- 11.3 to multiply 3-digit multiplicands by 1-digit multipliers
- 11.4 to multiply 3-digit money amounts by 1-digit numbers
- 11.5 to solve related problems in realistic settings
- 12.1 to write the fraction of a pictured set having a specified attribute
- 12.2 to divide 1- and 2-digit dividends by 1-digit divisors resulting in 1-digit quotients
- 12.3 to divide 2-digit dividends by 1-digit divisors resulting in 2-digit quotients
- 12.4 to divide 3-digit dividends by 1-digit divisors resulting in 2-digit quotients
- 12.5 to solve related problems in realistic settings

Teacher: _____
 Comments: _____

Level 4

- 1.1 to write whole numbers from word names or expanded form
- 1.2 to identify the value of a given digit
- 1.3 to round whole numbers
- 1.4 to order whole numbers from least to greatest or from greatest to least
- 1.5 to make change for amounts up to \$20
- 1.6 to solve related problems in realistic settings
- 2.1 to use properties and rules for addition and subtraction
- 2.2 to add two 2- or 3-digit addends
- 2.3 to add up to four addends with 2, 3, or 4 digits
- 2.4 to subtract numbers with up to 4 digits
- 2.5 to subtract a 2-, 3-, or 4-digit number from a 3- or 4-digit number with zeros
- 2.6 to solve related problems in realistic settings
- 3.1 to analyze data in a bar graph
- 3.2 to analyze data in pictographs
- 3.3 to analyze data in line graphs
- 3.4 to analyze data in circle graphs
- 3.5 to express the probability of an event
- 3.6 to solve related problems by comparing outcomes as more/less likely, most/least likely

- 4.4 to know basic multiplication and division facts
- 4.5 to solve related problems in realistic settings
- 5.1 to identify and describe characteristics of right angles
- 5.2 to identify and draw slides
- 5.3 to plot points on a grid from ordered pairs
- 5.4 to find the area of a figure
- 5.5 to solve related problems in realistic settings
- 6.1 to multiply 2-digit numbers
- 6.2 to multiply 3-digit numbers
- 6.3 to multiply 4-digit numbers
- 6.4 to solve related problems in realistic settings
- 7.1 to divide up to 3-digit dividends by 1-digit divisors
- 7.2 to divide 3- and 4-digit dividends by 1-digit divisors
- 7.3 to divide 3- and 4-digit dividends by 1-digit divisors with zeros in the quotient including money
- 7.4 to divide up to 4-digit money dividends by 1-digit divisors
- 7.5 to find the whole number average of up to 5 numbers
- 7.6 to solve related problems in realistic settings
- 8.1 to write fractions representing shaded parts of Fraction Bars
- 8.2 to write an equivalent fraction with a given denominator
- 8.3 to compare and order up to four fractions
- 8.4 to find a fraction of a whole number
- 8.5 to represent shaded parts of Fraction Bars by both fractions and mixed numbers
- 8.6 to solve related problems in realistic settings
- 9.1 to add and subtract like fractions
- 9.2 to add two fractions where one denominator is a multiple of the other
- 9.3 to subtract two fractions where one denominator is a multiple of the other
- 9.4 to add and subtract two like mixed numbers
- 9.5 to solve related problems in realistic settings
- 10.1 to find the perimeter in customary units
- 10.2 to measure a line segment to the nearest centimeter or millimeter
- 10.3 to choose the best estimate for the length, capacity, weight, or mass of a given object
- 10.4 to compare two measures expressed in different customary or metric measures
- 10.5 to choose the most appropriate Fahrenheit or Celsius temperature for described conditions
- 10.6 to determine elapsed time between two given times
- 10.7 to solve related problems in realistic settings
- 11.1 to write a decimal greater than one in word form
- 11.2 to write the value of an underlined digit in a decimal greater than one
- 11.3 to order up to four decimals through hundredths
- 11.4 to add up to three decimals through hundredths
- 11.5 to subtract decimals through hundredths
- 11.6 to solve related problems in a realistic setting
- 12.1 to multiply 2- and 3-digit numbers by multiples of 10
- 12.2 to multiply two 2-digit numbers using an array diagram
- 12.3 to multiply 3-digit numbers by 2-digit numbers including money
- 12.4 to multiply three 1- or 2-digit numbers
- 12.5 to solve related problems in realistic settings
- 13.1 to divide 2- and 3-digit dividends by 2-digit divisors resulting in 1-digit quotients
- 13.2 to divide 3-digit dividends by 2-digit divisors resulting in 2-digit quotients
- 13.3 to find the average of a set of numbers
- 13.4 to solve related problems in realistic settings

Teacher: _____
 Comments: _____



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
Elementary School Special Session Registration

Student [Redacted] Student Number [Redacted] Grade 2
(Last name) (First name)

Address [Redacted]
Street Address City Zip

Name of Parent/Guardian [Redacted] Telephone: Home [Redacted] Emergency [Redacted]

Home School [Redacted] Home School Teacher [Redacted]

Special Session School Assignment [Redacted]

Student's Date of Birth 6/6/87 High Risk Medical Information None

Legal Information on Record: no yes (Call home school.)

Student is on free lunch reduced lunch

SPECIAL PROGRAM ASSIGNMENT (Check services needed.)

ESOL Intensive ESOL Support ESE (Program)

Other _____

TRANSPORTATION

Needed: no yes regular ESE lift

Special Session Bus # SAC# 106D

RECOMMENDATION FOR SPECIAL SESSION (Check all that apply.)

Students in grades K-5 who are in ESOL (LEP students), Dropout Prevention, and those in ESE whose IEP includes a recommendation for Special Session.

Students in grades K-2 who receive recommendation from the principal may attend for remediation purposes only.

Students in grades 2-5 who received a score in **quartile 1** in the reading comprehension and/or mathematics concepts and applications on the most recent norm-referenced test.

Students in grades 2-5 who received a score in **quartile 2** in the reading comprehension and/or mathematics concepts and applications on the most recent norm-referenced test along with the recommendation of the principal.

Note: Students retained in their current grade level may be eligible for promotion upon completion of Special Session.

[Redacted] 5/4/95
 Signature of Teacher / Date

[Redacted] 5/11/95
 Signature of Principal / Date

PARENT/GUARDIAN NOTIFICATION

Yes, my child will attend the Special Session (summer school). The information on address and telephone numbers is correct or I have noted changes on my copy of the registration form.

No, my child will not attend the Special Session (summer school).

[Redacted]
 Signature of Parent / Guardian

5-5-95
 Date

Attachments to the registration form sent to the Special Session school:

Parent/guardian copy - signed registration form Copy of completed ESE IEP, if appropriate
 Other information _____

To be completed at the conclusion of Special Session:

STUDENT ATTENDANCE RECORD: Days Present Days Absent Days Tardy

Teacher comments:

PLACEMENT DECISION

Made following Special Session

Promoted Administrative Placement Retained

 Signature of Home School Principal / Date

 Signature of Special Session Administrator / Date

April 11, 1995

^{Been mean?}
Ben men

One day ^{the} mother ^{bird} flew

Out to gate so wrowes?

wale ^{when} wane mother Bird

was out. The ^{little} ^{birds} Brides

^{were} wrier so ^{mean} men that ^{they} take

made A plan to Be ^{mean} men

that is not ^{nice} niste is it no

than thae hate the momti

Trace along this edge.

I like my Dog Because

September
6. 95
My Favorite Thing

I like my Dog Because
She dos tricks and
I hade her in I was
five not only that But
She dos not live
the nose and She
follows me around
the nose and She
licks me all the
time and she dose
not Bage for
food

2+

My Favorite Thing

May 13, 1996

My favorite thing is my

dog. He is so special

because he always flows

me around. He loves to do

tricks a lot and when I

throw sticks he gets wild.

when I go to bed he's right

at my door and when I

get home his feet and paws

are under the garage. One

day my dog was on the other

side of the Pool and I
called hem in sted of
walking around he took
a step and he was in
the pool well by.

I have ever seen. My friend
has blond short hair and hazel
eyes ^{and} her skin color is peach. she is
nice and she won't fight over
something she will just say ok.
she loves sports and she plays
sports good and she loves
gymnastics and she good at
it that why she is my best
friend. and we like to ride bikes.

My Best friend is [redacted]. I like playing with her because she is nice and sweet and that she cares for me and another people. Sometimes she just looks at me and knows if I am happy or sad or what I want to play. Sometimes me and her play on the trampoline together one of the games we like to play is pop corn its were some one sits down curled up like a ball and the other person tries to run pop them by jumping. we also like to play in the pool when were hot sometimes we take out the pool toys and try to make a house out of them when we do we play house or something else. and we go to her house because I live on the same block she dose. We play with her tree house she has the biggest tree house

fall

8-23-96

My Best friend

[REDACTED] she has blue eyes

and blond hair. [REDACTED] and

me like reading and we

like riding are bickol to

the miller park her favorite

sport is soccer so is mine.

she love to shop she the man

gives me my stuff.



FLORIDA COMPREHENSIVE ASSESSMENT TEST (FCAT) 2001

**NORM-REFERENCED TEST
Student Report
Grade 08**

Student Name
Student Number
School Name and Number
District Name and Number
50 - PALM BEACH

This report shows your results from the FCAT National Norm-Referenced Test.

The FCAT Norm-Referenced Test measures your achievement on a test that was given to a national sample of students. Your norm-referenced scores in Reading Comprehension and in Mathematics Problem Solving describe your performance in relation to the performance of students throughout the nation. Your scores are shown below.

SUBJECT SCORES

	Scale Score	National Percentile Rank	Stanine
Reading Comprehension			
Mathematics Problem Solving			

CONTENT SCORES

	Number of Points Possible	Number of Points Earned	Number of Questions Attempted
Reading Comprehension			
Initial Understanding			
Interpretation			
Critical Analysis			
Strategies			
Mathematics Problem Solving			
Measurement			
Estimation			
Problem Solving			
Number Relationships			
Number Systems			
Patterns & Functions			
Algebra			
Statistics			
Probability			
Geometry			

The Scale Score expresses your performance and allows comparisons from year to year. Reading Comprehension Scale Scores range from 510 to 820. Mathematics Problem Solving Scale Scores range from 527 to 836.

The National Percentile Rank and Stanine indicate your relative standing in comparison to the national reference group. National Percentile Ranks range from 1 to 99. Stanines range from 1 to 9.

If you took the test again, your National Percentile Rank might be slightly higher or lower than stated here. However, your National Percentile Rank would probably fall within a certain range. For Reading Comprehension, your National Percentile Rank should be between 43 and 67. For Mathematics Problem Solving, your National Percentile Rank should be between 24 and 44.

Each question was worth 1 point.



FLORIDA COMPREHENSIVE ASSESSMENT TEST (FCAT) 2001

**SUNSHINE STATE STANDARDS
Student Report
Grade 08**

Student Name
 Student Number
 School Name and Number
 District Name and Number
50 - PALM BEACH

This report shows your results from the FCAT Sunshine State Standards Test.

The FCAT Sunshine State Standards Test measures your performance on selected benchmarks in reading and mathematics as defined by the *Sunshine State Standards*. Scores on this test are one indication of your achievement of the challenging content that Florida students are expected to know. On the FCAT, you can attain one of five possible achievement levels. The table below shows the scale score ranges for each Student Achievement Level.

Student Achievement Level Descriptions

FCAT Student Achievement Levels Scale Score Ranges

	Reading	Mathematics
Level 5:	394-500	371-500
Level 4:	350-393	347-370
Level 3:	310-349	310-346
Level 2:	271-309	280-309
Level 1:	100-270	100-279

- LEVEL 5:** Performance at this level indicates that the student has success with the most challenging content of the *Sunshine State Standards*. A Level 5 student answers most of the test questions correctly, including the most challenging questions.
- LEVEL 4:** Performance at this level indicates that the student has success with the challenging content of the *Sunshine State Standards*. A Level 4 student answers most of the questions correctly but may have only some success with questions that reflect the most challenging content.
- LEVEL 3:** Performance at this level indicates that the student has partial success with the challenging content of the *Sunshine State Standards*, but performance is inconsistent. A Level 3 student answers many of the questions correctly but is generally less successful with questions that are most challenging.
- LEVEL 2:** Performance at this level indicates that the student has limited success with the challenging content of the *Sunshine State Standards*.
- LEVEL 1:** Performance at this level indicates that the student has little success with the challenging content of the *Sunshine State Standards*.

Your scores are shown below.

SUBJECT SCORES

	Student Achievement Level	Scale Score	State Comparison: Thirds		
			Lowest	Middle	Highest
Reading					
Mathematics					

CONTENT SCORES

	Number of Points Possible	Number of Points Earned	State Comparison: Thirds		
			Lowest	Middle	Highest
Reading					
Words/Phrases					
Main Idea/Purpose					
Comparisons					
Reference/Research					
Mathematics					
Number Sense					
Measurement					
Geometry					
Algebraic Thinking					
Data Analysis					

If you took the test again, your scores might be slightly higher or lower than the scores on this report. However, your scores would probably fall within a certain range. For reading, your scale score should be between 274 and 310. For mathematics, your scale score should be between 294 and 316.

The check marks (✓) show if you scored in the lowest, middle, or highest third of grade 08 Florida students who took this test.

The Content chart shows the number of points possible and the number of points earned for each category. Each question on this portion of the test was worth one point. The results on your performance items will be reported separately.

MODE = MEMORY TRANSMISSION

START=FEB-17 12:24

END=FEB-17 12:25

FILE NO.=795

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-RPBHS RECORDS -

***** -RECORDS OFFICE - ***** 561 753 4022- *****



STUDENT SCORE REPORT
REPORT DATE: 6/17/04

YOUR SCORES

Test Date: JUNE 2004

Section	Score	Percentile
Verbal	490	42
Math	450	27

Seq# [REDACTED]

WHAT DOES YOUR SCORE RANGE MEAN?
No single numerical score can exactly represent your reasoning skills. If you had taken different editions of the test within a short period of time, your performance would probably vary somewhat on the 200 to 800 scale.

HOW DO YOU COMPARE WITH COLLEGE-BOUND SENIORS?
Percentiles indicate what percentage of test takers earned a score lower than yours. The national percentile for your verbal score of 490 is 42, indicating you did better than 42% of the national group of college-bound seniors. The national percentile for your math score of 450 is 27, indicating you did better than 27% of the national group of college-bound seniors.

DID YOU DO BETTER IN VERBAL OR MATH?
Your scores indicate that you performed similarly on the math test and the verbal test.

WHAT'S THE AVERAGE VERBAL OR MATH SCORE?
For college-bound seniors in the class of 2003, the average verbal score was 507 and the average math score was 518.

WILL YOUR SCORES CHANGE IF YOU TAKE THE TEST AGAIN?
If you take the test again, especially if you study between now and then, your scores may go up.

Among students with verbal scores of 490, 58% score higher on a second testing, 33% score lower, and 9% receive the same score. On average, a person with a verbal score of 490 gains 13 point(s) on a second testing.

Among students with math scores of 450, 62% score higher on a second testing, 30% score lower, and 8% receive the same score. On average, a person with a math score of 450 gains 17 point(s) on a second testing.

HOW DID YOU DO ON EACH TYPE OF QUESTION?

Question Type	Raw Score	Percentile
Text Completion	[REDACTED]	[REDACTED]
Reading	[REDACTED]	[REDACTED]
Listening	[REDACTED]	[REDACTED]
Writing	[REDACTED]	[REDACTED]
Math	[REDACTED]	[REDACTED]

Your responses to specific types of questions are presented as number right, number wrong, and number omitted. Raw scores are based on the specific edition of the test that you took. You cannot compare raw scores on different editions of the test or across different types of questions. For each type of question, you

can compare your performance to college-bound seniors who took this test. This percentile is an estimate of the percentage of college-bound seniors who earned a raw score lower than yours on each type of question.

SUMMARY OF SCORES

Register now for next year via our website at www.collegeboard.com

SAT I: Reasoning Test		SAT II: Subject Tests			
Score	Percentile	Score	Percentile	Score	Percentile
490	42	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
450	27	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

*Not all tests have sub-scores

ID INFORMATION

To take additional tests you can re-register by mail or by phone and use Visa, MasterCard, American Express, Discover, or JCB. You will need the registration number below and the test date

(see above). To send more score reports you will need the institution's 4-digit codes. See the back of this report for instructions on how to request these services.

Registration Number	[REDACTED]
Institution Code	[REDACTED]

ST [REDACTED]
 RACE: W SEX: F
 BIRTHDATE: [REDACTED]
 - SSN: [REDACTED]

SEX: F
 RACIAL/ETHNIC GROUP:
 White Not Hispanic
 Black Not Hispanic

Hispanic
 American Indian/Native Alaskan
 Asian/Pacific Islander
 Multi Racial

STUDENT NUMBER:
 [REDACTED]

BIRTHDATE: [REDACTED] Verified by Birth Certificate: G Yes G No
 If No, What Type Verification?

ADDRESS: (use pencil in this space until final)
 [REDACTED]

PHONE NUMBER: (optional)
 [REDACTED]

BIRTHPLACE:
 WPB, FL.

NAME OF PARENT(S) OR LEGAL GUARDIAN OR OTHER RESPONSIBLE ADULT AT HOME:

P	G	OA

CURRENT SCHOOL: (use pencil in this space until final)
 Name: CRESTWOOD MIDDLE SCHOOL
 Street: _____
 City: _____

Date First Entered This District

FLORIDA PERMANENT RECORD CARD
 CATEGORY A - Education Records
 GRADES K-5

School:	Grade:								
School Year: 19 ____ - ____		School Year: 19 ____ - ____		School Year: 19 ____ - ____		School Year: 19 ____ - ____		School Year: 19 ____ - ____	
Days Present:	Days Absent:								
COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED	
INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)	
School:	Grade:								
School Year: 19 ____ - ____		School Year: 19 ____ - ____		School Year: 19 ____ - ____		School Year: 19 ____ - ____		School Year: 19 ____ - ____	
Days Present:	Days Absent:								
COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED		COPY OF REPORT CARD INCLUDED	
INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)		INDICATE Administrative Placement (ADMP) Promote (P) Retain (R) Special Session (SS)	

For Secondary Cumulative Grades: **SEE STUDENT RECORD SCREENS**

GENERAL QUERIES

- A01 Student Name (District)
- A02 Student Name (School)

BASIC RECORD

- A03 Demographics
- A04 General Assignments
- A05 Contact Information
- A06 Health Information
- A07 Assignment History
- A08 Local Data Elements

COURSES

- A09 Course Requests
- A10 Current Schedule
- A11 Interactive Scheduler
- A12 Current Grades
- A13 Academic History
- A14 Graduation Status

ATTENDANCE

- A15 Daily Summary
- A16 Period Summary
- A17 Absence Detail
- A18 Absences (Class Hours)
- A19 Letter Preview (PRD ATD)

TESTING

- A20 Test Score Query
- A21 Test Score
- A2A Test Score Errors
- A22 Standard Mastery

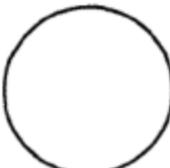
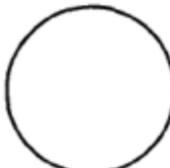
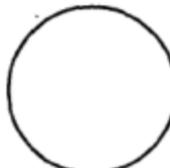
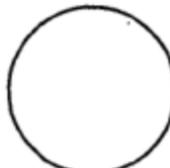
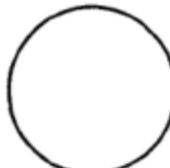
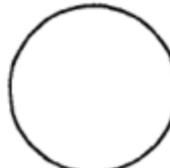
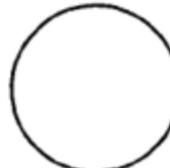
MISCELLANEOUS

- A23 Special Programs
- A24 Discipline
- A25 Fees and Fines
- A26 Recognition/Achievement
- A27 Letter History

SPECIAL CHARACTERISTIC CARD

STUDENT [REDACTED] *SN:* [REDACTED] *SN:* [REDACTED]

Place a red dot or red check in any area to denote that this student has additional information available

ESE	ESOL	504	DOP	HEALTH	MIGRANT	OTHER
						
See ESE Confidential Folder A23	See ESOL Folder A23, A03	See 504 Confidential Folder A23	See DOP Folder A23	See Health Folder A06	See Migrant A23	<hr/>

Fax Cover Sheet

RECORDS DEPARTMENT

[REDACTED]
[REDACTED]
Royal Palm Beach, FL 33411

Records Custodian

[REDACTED] (phone)

[REDACTED] (fax)

TO:

2/17/05

DATE:

2/17/05

FAX #:

[REDACTED]

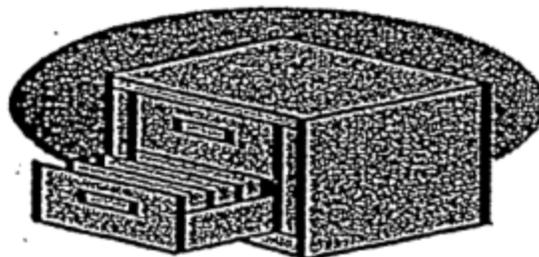
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02

, including Cover Sheet

RE:

[REDACTED]



Medical
Journals



FCAT Reports

Separate reports are produced for the *Sunshine State Standards* tests in FCAT Reading and Mathematics.

Sunshine State Standards (SSS) Reports The FCAT SSS Reading and Mathematics reports show test scores from Florida's tests of academic standards. These reports contain subject scores and content scores. Subject scores describe the overall achievement, and content scores give the number of points earned in specific skill areas. Success on the Reading and Mathematics tests can be best understood by using the achievement levels where a 3 or higher is on or above grade level.

Achievement Levels Five categories of achievement describe the success students have with the content tested on the FCAT Reading and Mathematics. Level 5 is the highest and Level 1 is the lowest.

- 5 This student has success with the most challenging content of the *Sunshine State Standards*. A student scoring in level 5 answers most of the test questions correctly, including the most challenging questions.
- 4 This student has success with the challenging content of the *Sunshine State Standards*. A student scoring in level 4 answers most of the test questions correctly, but may have only some success with questions that reflect the most challenging content.
- 3 This student has partial success with the challenging content of the *Sunshine State Standards*, but performance is inconsistent. A student scoring in level 3 answers many of the test questions correctly, but is generally less successful with questions that are the most challenging.
- 2 This student has limited success with the challenging content of the *Sunshine State Standards*.
- 1 This student has little success with the challenging content of the *Sunshine State Standards*.

Graduation Requirements—Students graduating in the year 2003 and later must receive a passing score on both the FCAT SSS Reading and FCAT SSS Mathematics tests to meet graduation requirements. For students that first took the 10th grade test in calendar year 2001, an alternative passing score is still in effect. For students that first took the 10th grade test in calendar year 2002 or later, higher passing scores apply.

Grade 10 FCAT Passing Scores	Reading	Mathematics
Current Passing Score	SS 300 = DSS 1926	SS 300 = DSS 1889
Alternate Passing Score	SS 287 = DSS 1856	SS 295 = DSS 1868

Informes FCAT (Spanish)

Se preparan informes separados para los exámenes del FCAT de lectura y matemáticas según las normas estatales *Sunshine State Standards*.

Informes según las normas estatales *Sunshine State Standards* (SSS) Los informes según las normas estatales SSS del FCAT presentan las calificaciones de los exámenes de lectura y matemáticas de las normas académicas de Florida. Estos informes contienen calificaciones por materias y calificaciones por contenido. Las calificaciones por materia proporcionan un resumen general del rendimiento y las calificaciones por contenido que proveen el número de puntos obtenidos en áreas de habilidades específicas. El éxito de los exámenes de lectura y matemáticas puede entenderse mejor utilizando los niveles de rendimiento en los que una calificación de 3 o superior está al nivel del grado o por encima.

Niveles de rendimiento El éxito que un estudiante ha logrado en el contenido examinado en el FCAT de lectura y matemáticas se describe por medio de cinco categorías. El nivel 5 es el más alto y el nivel 1 es el más bajo.

- 5 Este estudiante tiene éxito con el contenido más difícil de las normas *Sunshine State Standards*. Un estudiante del Nivel 5 responde a la mayoría de las preguntas del examen correctamente, incluyendo las preguntas más difíciles.
- 4 Este estudiante tiene éxito con el contenido difícil de las normas *Sunshine State Standards*. Un estudiante del Nivel 4 responde a la mayoría de las preguntas correctamente, pero es posible que sólo tenga cierto éxito con las preguntas que reflejan el contenido más difícil.
- 3 Este estudiante tiene un éxito parcial con el contenido difícil de las normas *Sunshine State Standards*, pero su rendimiento es inconsistente. Un estudiante del Nivel 3 responde muchas de las preguntas del examen correctamente, pero por lo general tiene menos éxito con las preguntas que son más difíciles.
- 2 Este estudiante tiene éxito limitado con el contenido difícil de las normas *Sunshine State Standards*.
- 1 Este estudiante tiene poco éxito con el contenido difícil de las normas *Sunshine State Standards*.

Requisitos para la graduación – Los estudiantes que se gradúan en el 2003 o después deben obtener una calificación de aprobado tanto en el FCAT (SSS) de lectura como en el FCAT (SSS) de matemáticas y así cumplir con los requisitos de graduación. Para los estudiantes que tomaron el examen del 10° grado por primera vez en el año 2001, todavía está en vigor una calificación de aprobado alternativa. Para los estudiantes que tomaron el examen del 10° grado por primera vez en el año 2002 o después, puede que le sean aplicadas calificaciones más altas que de aprobado.

FCAT para 10° grado Calificaciones de aprobado	Lectura	Matemáticas
Calificación de aprobado actual	SS 300 = DSS 1926	SS 300 = DSS 1889
Calificación de aprobado alternativa	SS 287 = DSS 1856	SS 295 = DSS 1868

Rapò FCAT (Haitian Creole)

Yo prepare rapò apa pou egzamen lekti ak matematik FCAT bay swivan prensip *Sunshine State Standards* yo.

Rapò *Sunshine State Standards* (SSS) Rapò FCAT SSS pou lekti ak matematiklan montre nòt elèv yo fè nan egzamen Florida bay sou prensip akademik yo. Rapò sa yo gen nòt pou matyè ak nòt pou kontni ladan yo. Nòt pou matyè yo dekri tout sa elèv la reyalize anjeneral epi nòt pou k ontri yo bay kantite pwen elèv la fè nan yon matyè byen detèmine. Ou ka konprann kisa elèv la reyalize nan egzamen lekti ak matematik la pi byen si w itilize yon nivo siksè kote 3 oswa plis se yon nòt ki nan nivo klas la oswa yon nòt ki pi wo pase nivo klas la.

Nivo siksè elèv yo Gen senk kategori siksè ki dekri nivo siksè elèv yo pote nan kontni yo teste nan egzamen lekti ak matematik FCAT la. Pi gwo nivo a se nivo 5 epi pi piti nivo a se nivo 1.

- 5 Elèv sa a gen siksè nan matyè ki te gen pi plis difikilte ladan yo nan egzamen *Sunshine State Standards* la. Yon elèv ki nan 5yèm Nivo reponn pifò kesyon egzamen yo kòrèkteman, elèv la menm reponn kesyon ki gen pi plis difikilte ladan yo.
- 4 Elèv sa a gen siksè nan matyè ki te gen difikilte ladan yo nan egzamen *Sunshine State Standards* la. Yon elèv ki nan 4yèm Nivo reponn pifò kesyon egzamen yo kòrèkteman, men li ka gen kèk siksè sèlman nan kesyon ki sanble yo gen pi plis difikilte ladan yo.
- 3 Elèv sa a gen enpe siksè nan matyè ki gen difikilte ladan yo nan egzamen *Sunshine State Standards* la, men pèfòmans lan pa rete estab. Yon elèv ki nan 3yèm Nivo reponn anpil nan kesyon egzamen yo kòrèkteman, men anjeneral li gen mwens siksè ak kesyon ki sanble yo gen pi plis difikilte ladan yo.
- 2 Elèv sa a gen siksè limite nan matyè ki gen difikilte ladan yo nan egzamen *Sunshine State Standards* la.
- 1 Elèv sa a gen yon ti siksè tou piti nan matyè ki gen difikilte ladan yo nan egzamen *Sunshine State Standards* la.

Egzijans pou diplome – Elèv k ap diplome nan ane 2003 a oswa apre sa dwe fè yon nòt pou pase ni egzamen lekti FCAT SSS la ni egzamen matematik FCAT SSS la alafwa pou yo ka ranpli kondisyon pou diplome a. Pou elèv ki te pran egzamen klas 10th nan ane 2001 an, gen yon nòt altènatif pou pase egzamen an ki toujou an efè toujou. Pou elèv ki te pran egzamen klas 10th nan pou lapremyè fwa nan ane 2002 a oswa apre sa, yo mande pi gwo nòt pou pase.

Nòt pou elèv klas 10 th fè pou pase egzamen FCAT la	Lekti	Matematik
Nòt pou pase koulye a	SS 300 = DSS 1926	SS 300 = DSS 1889
Nòt altènatif pou pase	SS 287 = DSS 1856	SS 295 = DSS 1868



October 2003
Florida Comprehensive Assessment Test (FCAT)
SUNSHINE STATE STANDARDS
Grade 11 Student Report

Student Name: [REDACTED]
 Student Number: [REDACTED]
 School Number and Name: [REDACTED]
 District Number and Name:
50-PALM BEACH

The Florida Department of Education believes that every student has the ability to learn and succeed. The purpose of the FCAT is to ensure that Florida's public schools are providing the best education possible, and preparing students to succeed in the competitive 21st Century job market.

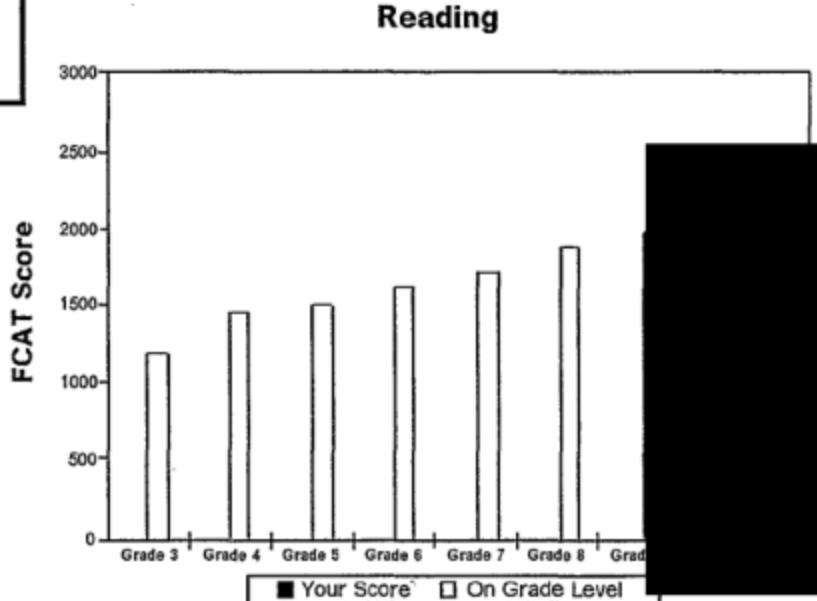
Working with teachers, the State has developed a measurement system that allows you to track a student's academic achievement from year to year and determine if a year's worth of learning has occurred in a year's time. This system also allows you to compare a student's score to a score that represents "grade level" achievement. If a student's score is above the "grade level" score, then they are performing at a level above their current grade. If it is below, they are in need of improvement. Using the "Content Scores," you are able to identify any specific academic skills needing improvement.

Below you will find your 2003 FCAT Reading and Mathematics scores, as well as your scores from previous years. The chart on the right side of the page shows your score compared to the score that represents "grade level" achievement.

Congratulations! You have passed the Reading test; however, your achievement needs improving. Talk to your teacher or guidance counselor about classes you should take to better prepare you for college or a career.

2003 Reading Content Scores		
Content Areas	Points Possible	Points Earned
Words/Phrases	[REDACTED]	[REDACTED]
Main Idea/Purpose	[REDACTED]	[REDACTED]
Comparisons	[REDACTED]	[REDACTED]
Reference/Research	[REDACTED]	[REDACTED]

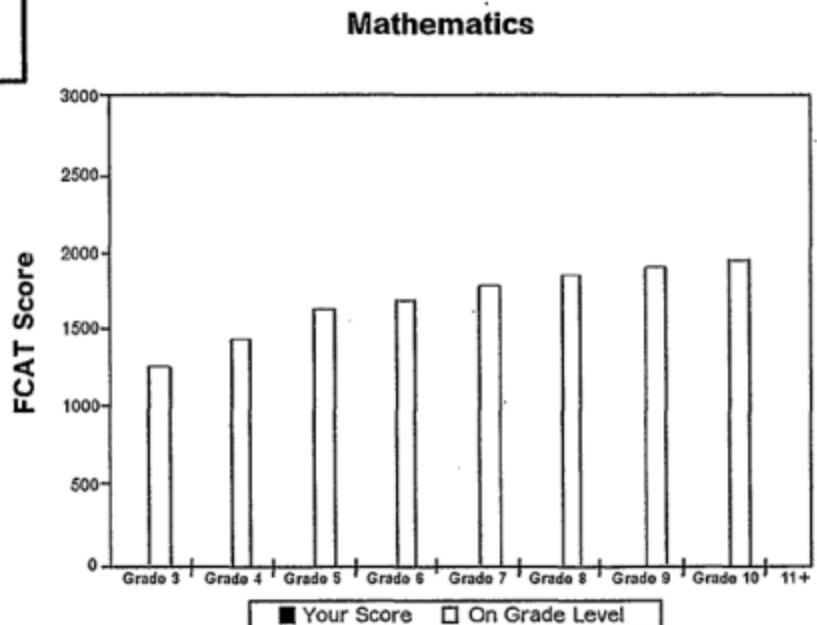
Year	2001	2002	2003
Grade Tested	NA	NA	[REDACTED]
Achievement Level			[REDACTED]
FCAT Score *			[REDACTED]



We were unable to find a Mathematics score that matched your student identification number. If you took the test this year, be sure to contact your school about locating your FCAT test scores.

2003 Mathematics Content Scores		
Content Areas	Points Possible	Points Earned
Number Sense		
Measurement		
Geometry		
Algebraic Thinking		
Data Analysis		

Year	2001	2002	2003
Grade Tested			10
Achievement Level			NT
FCAT Score *			NT



* These scores show your achievement on the day you were tested. If you had taken this test numerous times, it is likely that all of your scores would have been within a certain range. Your 2003 FCAT Reading scores probably would have been between 1975 and 2127.

NT=Not Tested NR=Not Reported NA=Data Not Available

Data Run Date: 11/10/2003

0040567



Spring 2003
FLORIDA COMPREHENSIVE ASSESSMENT TEST (FCAT)
MATHEMATICS SUNSHINE STATE STANDARDS PERFORMANCE TASKS
Student Report
Grade 10

This report provides your results on the FCAT 2003 Mathematics performance tasks. Each performance task on FCAT requires you to respond with either a short response or a longer, more detailed response. Short-response tasks are scored on a 2-point rubric and extended-response tasks are scored on a 4-point rubric.

One of the short-response tasks is shown below with a copy of your answer. The number of points you earned for your answer is shown in the box to the right.

FCAT 2003
 MATHEMATICS PERFORMANCE TASKS

Student Name [REDACTED]
 Student Number [REDACTED]
 School Name [REDACTED]
 School Number [REDACTED]
 District Name **PALM BEACH**
 District Number **50**

	This Performance Task Response	All Mathematics Performance Task Responses
Points Possible	[REDACTED]	[REDACTED]
Points Earned	[REDACTED]	[REDACTED]

The students in the senior class at Paradise Island High School have decided to raise money by selling graphing calculators and geometry tool kits. They have set aside \$3,000 to purchase the items they need to sell. They will spend \$75 for each calculator, and \$20 for each tool kit. From past experience, they know that twice as many students will buy the calculators as will buy the tool kits.

The inequality and equation below can be used to determine the number of each item the senior class should have available to sell, where c is the number of calculators and t is the number of tool kits.

$$75c + 20t \leq 3,000$$

$$c = 2t$$

How many tool kits should the senior class purchase? Show your work.

3,000

75 calc
20 tool

$$75c + 20t \leq 3,000$$

$$95 = 2,120$$

$$95 = 40$$

Number of tool kits **40**

PT10M



Spring 2003
FLORIDA COMPREHENSIVE ASSESSMENT TEST (FCAT)
READING SUNSHINE STATE STANDARDS PERFORMANCE TASKS
Student Report
Grade 10

This report provides your results on the FCAT 2003 Reading performance tasks. Each performance task on FCAT requires you to respond with either a short response or a longer, more detailed response. Short-response tasks are scored on a 2-point rubric and extended-response tasks are scored on a 4-point rubric.

One of the short-response tasks is shown below with a copy of your answer. The number of points you earned for your answer is shown in the box to the right.

This task required you to read a passage about an American zoologist's attempts to rehabilitate two young gorillas in Africa.

Describe how Coco and Pucker change as a result of their experience with Dian Fossey. Use details and information from the story to explain your answer.

FCAT 2003
 READING PERFORMANCE TASKS

Student Name [REDACTED]
 Student Number [REDACTED]
 School Name [REDACTED]
 School Number [REDACTED]
 District Name **PALM BEACH**
 District Number **50**

	This Performance Task Response	All Reading Performance Task Responses
Points Possible	[REDACTED]	[REDACTED]
Points Earned	[REDACTED]	[REDACTED]

I think Coco and Pucker change their experience with Dian Fossey. In such ways as when they first meet her they would rarely eat or accept things but gradually they started accepting food and started adapting to Dian Fossey. And even though she took absence from them when she came back they still knew her and when she fed them they accepted.



FCAT WRITING STUDENT REPORT

2001
Grade 8

WRITING TO CONVINCe

Student Name: [REDACTED]
Student I.D. No.: [REDACTED]
School: [REDACTED]
District: PALM BEACH

SCORE [REDACTED]

How Papers Are Scored

The student responses are scored by trained readers using the holistic method to evaluate a piece of writing for its overall quality. The readers consider four elements: focus, organization, support, and conventions. In this type of scoring, readers make a judgment about the entire response and do not focus on any one aspect of the writing.

Focus refers to how clearly the paper presents and maintains a clear main idea, theme, or unifying point. Papers representing the higher end of the point scale demonstrate a consistent awareness of the topic and do not contain extraneous information.

Organization refers to the structure or plan of development (beginning, middle, and end) and whether the points are logically related to one another. Organization also refers to (1) the use of transitional devices to relate the supporting ideas to the main idea, theme, or unifying point and (2) the evidence of a connection between sentences. Papers representing the higher end of the point scale use transitions to signal the plan or text structure and end with summary or concluding statements.

Support refers to the quality of the details used to explain, clarify, or define. The quality of the support depends on word choice, specificity, depth, and thoroughness. Papers representing the higher end of the point scale provide examples and illustrations in which the relationship between the supporting ideas and the topic is clear.

Conventions refers to punctuation, capitalization, spelling, and variation in sentence structure used in the paper. The conventions are basic writing skills included in Florida's Sunshine State Standards. Papers representing the higher end of the point scale follow, with few exceptions, the conventions of punctuation, capitalization, and spelling and use a variety of sentence structures to present ideas.

Dear Student:

The paper you wrote in February as part of the FCAT has been read independently by two people trained to score this test. Each reader judged the paper against a set of standards and gave it an overall score. Your score is the average of the two readers' scores.

This writing score will help you, your parents or guardians, and your teachers understand how well you performed on this statewide writing test. A description of how papers are scored is printed on the left side of this report. A description of each possible score is printed on the back of this report.

Remember, you were given 45 minutes to read the assigned topic, plan what to write, and then write your response. The conditions under which you write papers in class or at home may not be the same as those for this test; therefore, the writing may not be the same. You and your teachers should consider the score on this test along with all of your other writing when planning activities to continue developing your writing skills.

DESCRIPTION OF THE TOPIC:

You were asked to convince your friend to eat at your favorite place.

RUN DATE: 04/16/01

50-1691

Description of Grade 4 Writing Scores

- 6.0:** The writing focuses on the topic, is logically organized, and includes ample development of supporting ideas or examples. It demonstrates a mature command of language, including precision in word choice. Sentences vary in structure. Punctuation, capitalization, and spelling are generally correct.
- 5.5:** The writing was given a 5 by one reader and a 6 by the other reader.
- 5.0:** The writing focuses on the topic with adequate development of supporting ideas or examples. It has an organizational pattern, though lapses may occur. Word choice is adequate. Sentences vary in structure. Punctuation, capitalization, and spelling are generally correct.
- 4.5:** The writing was given a 4 by one reader and a 5 by the other reader.
- 4.0:** The writing focuses on the topic, though it may contain extraneous information. An organizational pattern is evident, but lapses may occur. Some supporting ideas contain specifics and details, but others are not developed. Word choice is adequate. Sentences vary somewhat in structure, though many are simple. Punctuation, capitalization, and spelling are usually correct.
- 3.5:** The writing was given a 3 by one reader and a 4 by the other reader.
- 3.0:** The writing generally focuses on the topic, though it may contain extraneous information. An organizational pattern has been attempted, but lapses may occur. Some of the supporting ideas or examples may not be developed. Word choice is adequate. Sentences vary somewhat in structure, though many are simple. Punctuation and capitalization are sometimes incorrect, but most commonly used words are spelled correctly.
- 2.5:** The writing was given a 2 by one reader and a 3 by the other reader.
- 2.0:** The writing may be slightly related to the topic or offer little relevant information and few supporting ideas or examples. There is little evidence of an organizational pattern. Word choice may be limited or immature. Sentences may be limited to simple constructions. Frequent errors may occur in punctuation, capitalization, and spelling.
- 1.5:** The writing was given a 1 by one reader and a 2 by the other reader.
- 1.0:** The writing may only minimally address the topic because there is little or no development of supporting ideas or examples. No organizational pattern is evident. Ideas are provided through lists, and word choice is limited or immature. Unrelated information may be included. Frequent errors in punctuation, capitalization, and spelling may impede communication.
- U:** The writing is unrelated to the assigned topic or cannot be read.

Description of Grade 8 Writing Scores

- 6.0:** The writing focuses on the topic, is logically organized, and includes substantial development of supporting ideas or examples. It demonstrates a mature command of language, including precision in word choice. Sentences vary in structure. Punctuation, capitalization, and spelling are generally correct.
- 5.5:** The writing was given a 5 by one reader and a 6 by the other reader.
- 5.0:** The writing focuses on the topic with ample development of supporting ideas or examples. It has an organizational pattern, though lapses may occur. Word choice is adequate. Sentences vary in structure. Punctuation, capitalization, and spelling are generally correct.
- 4.5:** The writing was given a 4 by one reader and a 5 by the other reader.
- 4.0:** The writing focuses on the topic, though it may contain extraneous information. An organizational pattern is evident, but lapses may occur. Some supporting ideas contain specifics and details, but others are not developed. Word choice is adequate. Sentences vary somewhat in structure, though many are simple. Punctuation, capitalization, and spelling are usually correct.
- 3.5:** The writing was given a 3 by one reader and a 4 by the other reader.
- 3.0:** The writing generally focuses on the topic, though it may contain extraneous information. An organizational pattern has been attempted, but lapses may occur. Some of the supporting ideas or examples may not be developed. Word choice is adequate. Sentences vary somewhat in structure, though many are simple. Punctuation and capitalization are sometimes incorrect, but most commonly used words are spelled correctly.
- 2.5:** The writing was given a 2 by one reader and a 3 by the other reader.
- 2.0:** The writing may be slightly related to the topic or offer little relevant information and few supporting ideas or examples. There is little evidence of an organizational pattern. Word choice may be limited or immature. Sentences may be limited to simple constructions. Frequent errors may occur in punctuation, capitalization, and spelling.
- 1.5:** The writing was given a 1 by one reader and a 2 by the other reader.
- 1.0:** The writing may only minimally address the topic because there is little or no development of supporting ideas or examples. No organizational pattern is evident. Ideas are provided through lists, and word choice is limited or immature. Unrelated information may be included. Frequent errors in punctuation, capitalization, and spelling may impede communication.
- U:** The writing is unrelated to the assigned topic or cannot be read.

Description of Grade 10 Writing Scores

- 6.0:** The writing focuses on the topic, is logically organized, and includes substantial development of supporting ideas or examples. It demonstrates a mature command of language with freshness of expression. Sentences vary in structure. There are few, if any, usage, punctuation, or spelling errors.
- 5.5:** The writing was given a 5 by one reader and a 6 by the other reader.
- 5.0:** The writing focuses on the topic, is logically organized, and includes ample development of supporting ideas or examples. It demonstrates a mature command of language. Sentences vary in structure. Usage, punctuation, and spelling are generally correct.
- 4.5:** The writing was given a 4 by one reader and a 5 by the other reader.
- 4.0:** The writing focuses on the topic, though it may contain loosely related information. An organizational pattern is apparent. Some of the supporting ideas contain specifics and details, but others do not. Word choice is adequate. Sentences vary in structure. Usage, punctuation, and spelling are generally correct.
- 3.5:** The writing was given a 3 by one reader and a 4 by the other reader.
- 3.0:** The writing generally focuses on the topic, though it may contain loosely related information. An organizational pattern is demonstrated. Development of the supporting ideas may be uneven. Word choice is adequate. There is some variation in sentence structure. Usage, punctuation, and spelling are generally correct.
- 2.5:** The writing was given a 2 by one reader and a 3 by the other reader.
- 2.0:** The writing addresses the topic, though it may lose focus by including extraneous information. An organizational pattern is demonstrated. Development of the supporting ideas may be nonspecific. Word choice may be limited. Frequent errors may occur in sentence construction, usage, punctuation, and spelling.
- 1.5:** The writing was given a 1 by one reader and a 2 by the other reader.
- 1.0:** The writing addresses the topic, though it may lose focus by including extraneous and loosely related ideas. The organizational pattern is weak. Ideas are presented through lists and limited or inappropriate word choice. Frequent errors may occur in sentence construction, usage, punctuation, and spelling.
- U:** The writing is unrelated to the assigned topic or cannot be read.



FLORIDA COMPREHENSIVE ASSESSMENT TEST (FCAT) 2000

**NORM-REFERENCED TEST
Student Report
Grade 07**

Student Name [REDACTED]
 Student Number [REDACTED]
 School Name and Number [REDACTED]
 District Name and Number [REDACTED]
50 - PALM BEACH

2

This report shows your results from the FCAT National Norm-Referenced Test.

The FCAT Norm-Referenced Test measures your achievement on a test that was given to a national sample of students. Your norm-referenced scores in Reading Comprehension and in Mathematics Problem Solving describe your performance in relation to the performance of students throughout the nation. Your scores are shown below.

SUBJECT SCORES

	Scale Score	National Percentile Rank	Stanine
Reading Comprehension	[REDACTED]	[REDACTED]	[REDACTED]
Mathematics Problem Solving	[REDACTED]	[REDACTED]	[REDACTED]

The Scale Score expresses your performance and allows comparisons from year to year. Reading Comprehension Scale Scores range from 490 to 819. Mathematics Problem Solving Scale Scores range from 513 to 829.

The National Percentile Rank and Stanine indicate your relative standing in comparison to the national reference group. National Percentile Ranks range from 1 to 99. Stanines range from 1 to 9.

If you took the test again, your National Percentile Rank might be slightly higher or lower than stated here. However, your National Percentile Rank would probably fall within a certain range. For Reading Comprehension, your National Percentile Rank should be between 70 and 89. For Mathematics Problem Solving, your National Percentile Rank should be between 43 and 66.

CONTENT SCORES

	Number of Points Possible	Number of Points Earned	Number of Questions Attempted
Reading Comprehension	[REDACTED]	[REDACTED]	[REDACTED]
Initial Understanding	[REDACTED]	[REDACTED]	[REDACTED]
Interpretation	[REDACTED]	[REDACTED]	[REDACTED]
Critical Analysis	[REDACTED]	[REDACTED]	[REDACTED]
Strategies	[REDACTED]	[REDACTED]	[REDACTED]
Mathematics Problem Solving	[REDACTED]	[REDACTED]	[REDACTED]
Measurement	[REDACTED]	[REDACTED]	[REDACTED]
Estimation	[REDACTED]	[REDACTED]	[REDACTED]
Problem Solving	[REDACTED]	[REDACTED]	[REDACTED]
Number Relationships	[REDACTED]	[REDACTED]	[REDACTED]
Number Systems	[REDACTED]	[REDACTED]	[REDACTED]
Patterns & Functions	[REDACTED]	[REDACTED]	[REDACTED]
Algebra	[REDACTED]	[REDACTED]	[REDACTED]
Statistics	[REDACTED]	[REDACTED]	[REDACTED]
Probability	[REDACTED]	[REDACTED]	[REDACTED]
Geometry	[REDACTED]	[REDACTED]	[REDACTED]

The content tested is described on the back of this report. Each question was worth 1 point.

Grades 5, 6, 7, and 8

The FCAT NRT Reading Comprehension Test assesses the following objectives:

- *Initial Understanding* - Demonstrate the ability to comprehend explicitly stated relationships in a variety of reading selections.
- *Interpretation* - Demonstrate the ability to form an interpretation of a variety of reading selections based on explicit and implicit information in the selections.
- *Critical Analysis* - Demonstrate the ability to synthesize and evaluate explicit and implicit information in a variety of reading selections.
- *Strategies* - Demonstrate the ability to recognize and apply text factors and reading strategies in a variety of reading selections.

The above objectives are measured within the following contexts:

- *Recreational* - material typically read for enjoyment.
- *Textual* - material typically found in grade-appropriate textbooks and other sources of information.
- *Functional* - material typically encountered in everyday life situations.

The FCAT NRT Mathematics Problem Solving Test assesses the following objectives:

- *Measurement* - Demonstrate an understanding of the principles of measurement.
- *Estimation* - Determine the reasonableness of results and apply estimation in problem solving.
- *Problem Solving Strategies* - Demonstrate an understanding of the process of solving conventional and non-routine problems.
- *Number and Number Relationships* - Represent and use numbers in equivalent forms in real-world and mathematical problems, and demonstrate number sense for whole numbers, fractions, decimals, and integers.
- *Number Systems and Number Theory* - Demonstrate an understanding of relationships among arithmetic operations and apply concepts of number theory such as primes, factors, and multiples in real-world and mathematical problems.
- *Patterns and Functions* - Identify numerical and geometric patterns and functions and use them to solve problems.
- *Algebra* - Demonstrate the ability to evaluate expressions and solve linear equations.
- *Statistics* - Demonstrate an understanding of the relationships in data sets.
- *Probability* - Demonstrate an understanding of the laws governing chance.
- *Geometry* - Demonstrate an understanding of geometric principles.

Grados 5, 6, 7, y 8

La Prueba de Comprensión de Lectura FCAT NRT evalúa los siguientes objetivos:

- *Entendimiento* - Demostrar su habilidad para comprender explícitamente el contenido y la relación entre sí dentro de una variedad de selecciones de lectura.
- *Interpretación* - Demostrar su capacidad interpretativa dentro de una variedad de selecciones de lectura, basándose en información explícita e implícita en dichas selecciones.
- *Análisis crítico* - Demostrar la habilidad para sintetizar y evaluar información explícita e implícita en una variedad de selecciones de lectura.
- *Estrategias* - Demostrar habilidad para reconocer y aplicar el contenido del texto y estrategias utilizadas en una variedad de selecciones de lectura.

Los objetivos anteriores se evalúan en los contextos siguientes:

- *Recreativo* - material utilizado para entretenimiento.
- *Textual* - material utilizado en libros de texto del grado apropiado y en otros medios informativo.
- *Funcional* - material utilizado en la vida diaria.

La Prueba para Resolver Problemas de Matemáticas FCAT NRT evalúa los siguientes objetivos:

- *Medidas* - Demostrar sus conocimientos de los principios de medir.
- *Estimación* - Determinar cuán razonables son los resultados y aplicar la estimación en la solución de problemas.
- *Estrategias para resolver problemas* - Demostrar comprensión del proceso de resolver problemas convencionales y fuera de lo común.
- *Números y relaciones entre números* - Representar y usar números en formas equivalentes en problemas de matemática y de la vida diaria, y demostrar sentido para las fracciones, los decimales y los números enteros, positivos y negativos.
- *Sistemas y teoría de los números* - Demostrar conocimiento numérico de las relaciones entre las operaciones de aritmética y aplicar conceptos de la teoría de los números tales como números primos, factores y múltiplos en problemas de matemática y de la vida diaria.
- *Pautas y funciones* - Identificar funciones y pautas numéricas y usarlas para resolver problemas.
- *Algebra* - Demostrar la capacidad para evaluar expresiones algebraicas y resolver ecuaciones lineales.
- *Estadística* - Demostrar conocimiento en procesamiento de data.
- *Probabilidad* - Demostrar conocimiento de las leyes que gobiernan el azar.
- *Geometría* - Demostrar conocimiento de los principios de geometría.

6/1/98 12:50pm

LEVEL & COURSE PERFORMANCE

End of Year Report

Course	Total Time	Total Corr/Att Exercises	Total Percent Correct	Enroll Level	IPM Level	Current Level	Gain
1477			(Enroll Date - 1/26/98)	Class			
MCS	1:39			4.54	4.45	4.63	0.18
PS	0:46			5.11	5.11	5.17	0.06
TRN	0:45			4.00	4.00	4.36	0.36
RA				N/A	N/A	N/A	N/A

6/1/98 11:56am

LEVEL & COURSE PERFORMANCE

End of Year Report

Course	Total Time	Total Corr/Att Exercises	Total Percent Correct	Enroll Level	IPM Level	Current Level	Gain
1431		(Enroll Date - 8/19/97)		Class			
RW	7:00			4.50	5.18	5.45	0.27
MCS	7:58			4.49	4.50	4.67	0.17
RA				N/A	N/A	N/A	N/A
WRT	0:00			N/A	N/A	N/A	N/A

[REDACTED] (continued)

=====

Course	Total Time	Total Corr/Att Exercises	Total Percent Correct	Enroll Level	IPM Level	Current Level	Gain
4231	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
			(Enroll Date - 9/10/96)				
MCS	4:05	[REDACTED]	[REDACTED]	3.49	3.53	3.56	0.03
RW	3:49	[REDACTED]	[REDACTED]	3.50	3.80	3.91	0.11
RA		[REDACTED]	[REDACTED]	N/A	N/A	N/A	N/A

[REDACTED]

Crs.	Tot Time	Total Cor/At Exer	Total Per Corr	Enr Lvl	IPM Lvl	Curr Lvl	Tot Sess	Gain
3330	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
				8/22/95)				
RA				N/A	N/A	N/A	7	N/A
WE	2:3			--	--	--	--	--
MCS	9:4			2.50	2.01	2.26	45	0.25
RW	5:2			2.80	2.82	3.12	28	0.30
FAB	2:2			N/A	N/A	N/A	13	N/A

██████████ (continued)
 =====

Crs.	Tot Time	Total Cor/At Exer	Total Per Corr	Enr Lvl	IPM Lvl	Curr Lvl	Tot Sess	Gain
2125	██████████	(Enroll Date = 8/29/94)						
RR	7:05	██████████		0.50	0.43	0.99	61	0.56
MCS	11:35	██████████		0.92	0.52	1.48	61	0.96
IR	0:57	██████████		1.00	--	1.57	5	0.00
SD	0:05	██████████		--	--	--	--	--
WE	1:44	██████████		--	--	--	--	--
RW	1:29	██████████		2.80	--	2.80	8	0.00

PALM BEACH COUNTY PUBLIC SCHOOLS

Elementary
Interim Report of
Unsatisfactory Progress

School: [redacted] Date: 5.6.97 Grade: 4

To the parent or guardian of [redacted]:

This report is to advise you that your child is making unsatisfactory progress in:

[redacted]

In order to improve, your child needs to:

[redacted]

We need to work together. Please discuss this report with your child.

[redacted]
Teacher

[redacted]
School Phone Number

Please sign and return the portion below the dotted line.

[redacted]
Student's Signature
[redacted]
Parent's Signature

5-12-97
Date
[redacted]
Parent's Phone Number(s)

Since you will not call me.

Wednesday at 7:30 AM

I wish to request a conference with the teacher. Yes No

White/Parent Copy
PBSD 0764 (FY 86 Revision)

Yellow/Cumulative Folder
WN 01-9890

PALM BEACH COUNTY PUBLIC SCHOOLS

Elementary
Interim Report of
Unsatisfactory Progress

School: [redacted] Date: 5.6.97 Grade: 4

To the parent or guardian of [redacted]:

This report is to advise you that your child is making unsatisfactory progress in:

[redacted]

In order to improve, your child needs to:

[redacted]

We need to work together. Please discuss this report with your child.

[redacted]
Teacher

[redacted]
School Phone Number

Please sign and return the portion below the dotted line.

Student's Signature

Date

Parent's Signature

Parent's Phone Number(s)

I wish to request a conference with the teacher. Yes No

PALM BEACH COUNTY PUBLIC SCHOOLS

Elementary
Interim Report of
Unsatisfactory Progress

School: [redacted] Date: 9-26-96 Grade: 4

To the parent or guardian of [redacted]:

This report is to advise you that your child is making unsatisfactory progress in:

[redacted]

In order to improve, your child needs to:

[redacted]

We need to work together. Please discuss this report with your child.

[redacted]
Teacher

[redacted]
School Phone Number

Please sign and return the portion below the dotted line.

[redacted]
Student Signature

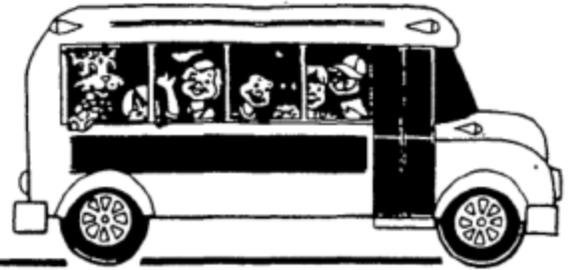
9-26-96
Date

Parent's Signature

[redacted]
Parent's Phone Number(s)

I wish to request a conference with the teacher. Yes No





ROYAL PALM BEACH, FLORIDA 33411
 PHONE: [REDACTED] PR: [REDACTED] FAX: [REDACTED]
 [REDACTED] Principal

4-19-94
 Date

Dear Parent,

In a continuing effort to provide additional educational opportunities and assistance for students to achieve academic success, the School Board of Palm Beach County will offer a twenty (20) day elementary Special Session (summer school) program.



_____ will attend the Special Session (summer school). A student may be recommended to attend the Summer School Session (recommended by teacher or parental request to attend) based on the following eligibility: students who require more than the normal 180-day term to complete the expected course of study, for flexibility for students (K-5) to allow for maintenance of skills (at grade level) and /or consideration of special needs students (E.G. ADHD, ADD, ESOL, DOP, ETC.), students being promoted to the next level who need "maintenance" and alternative methods to sustain their continuous progress, or students who receive a score in the first or second quartile in the reading and/or mathematics sections of the CTBS/4 may be recommended, but are not required, to attend Summer School. It is recommended that your child attend the elementary Special Session at H. L. Johnson Elementary School, Monday through Friday, beginning Friday, July 1, 1994 ending Friday, July 29, 1994.

Our profession staff considers it essential that your child attend the Special Session (summer school) program on a regular basis with no more than (3) absences if recommended by the teacher to attend.

Please sign, date and return this form to your child's school by May 5, 1994.

If you have questions or would like to discuss this recommendation, please contact our school at [REDACTED]

Parent/Guardian notification:

_____ Yes, my child will attend summer school

_____ No, my child will NOT attend summer school.



cc: Student Cumulative Record

PALM BEACH COUNTY PUBLIC SCHOOLS

Elementary
Interim Report of
Unsatisfactory Progress

School: [redacted] Date: 3/2/95 Grade: 2

To the parent or guardian of [redacted]:

This report is to advise you that your child is making unsatisfactory progress in:

[redacted]

In order to improve, your child needs to:

[redacted]

We need to work together. Please discuss this report with your child.

[redacted]

[redacted]
School Phone Number

Please sign and return the portion below the dotted line.

[redacted]
Student's Signature

3-5-95
Date

[redacted]
Parent's Signature

[redacted]
Parent's Phone Number(s)

Please Call

I wish to request a conference with the teacher. Yes No

White/Parent Copy
PBSD 0764 (FY 86 Revision)

Yellow/Cumulative Folder



ROYAL PALM BEACH, FLORIDA 33411

PHONE: [Redacted]

PR: [Redacted]

FAH: [Redacted]

[Redacted] Principal

[Redacted] Student's Name

5/5/95
Date

Dear [Redacted]

In a continuing effort to keep you informed, this letter is to notify you that your child is experiencing difficulty in the area(s) checked below:



The Pupil Progression Plan for Palm Beach County requires that students demonstrate continuous progress in the academic areas of reading, writing, mathematics, science, social studies and computer literacy. Classroom performance, maturity, and attendance, as well as physical, emotional and social factors are also considered in promotion decisions.

It is our judgment that your child may experience difficulty meeting the minimum requirements for promotion. Students who do not meet minimum requirements may be subject to retention. We believe that significant progress can be made if parents, students and teachers work together during the remainder of the school year.

It is urgent that you arrange a conference with your child's teacher. Please sign the form below and return it to the school.

Sincerely,

[Redacted] Teacher

[Redacted] Principal

cc: Cumulative Guidance Folder

I have been advised that [Redacted] Student's Name

may have difficulty meeting the

minimum requirements for promotion.

[Redacted] Parent's/Guardian's Signature

5-5-95
Date



ROYAL PALM BEACH, FLORIDA 33411
PHONE: [Redacted] PR: [Redacted] FAX: [Redacted]

[Redacted] Principal
[Redacted]

5/5/95
Date

Student's Name

Dear [Redacted]

In a continuing effort to keep you informed, this letter is to notify you that your child is experiencing difficulty in the area(s) checked below:



The Pupil Progression Plan for Palm Beach County requires that students demonstrate continuous progress in the academic areas of reading, writing, mathematics, science, social studies and computer literacy. Classroom performance, maturity, and attendance, as well as physical, emotional and social factors are also considered in promotion decisions.

It is our judgment that your child may experience difficulty meeting the minimum requirements for promotion. Students who do not meet minimum requirements may be subject to retention. We believe that significant progress can be made if parents, students and teachers work together during the remainder of the school year.

It is urgent that you arrange a conference with your child's teacher. Please sign the form below and return it to the school.

Sincerely,

[Redacted] Teacher

[Redacted]

cc: Cumulative Guidance Folder

I have been advised that [Redacted] Student's Name

may have difficulty meeting the

minimum requirements for promotion.

[Redacted] Parent or Guardian Signature

5-5-95
Date



THE SCHOOL BOARD OF PALM BEACH COUNTY
Elementary School Special Session Registration

Student [redacted] Student Number [redacted] Grade 1
Last name (First name)
Address [redacted] Street Address [redacted] City [redacted] Zip [redacted]
Name of Parent/Guardian [redacted] Telephone: Home [redacted] Emergency [redacted]
Home School [redacted] Home School Teacher [redacted]
Special Session School Assignment [redacted]
Student's Date of Birth [redacted] High Risk Medical Information
Legal Information on Record: no yes (Call home school.)
Student is on free lunch reduced lunch

SPECIAL PROGRAM ASSIGNMENT (Check services needed.)
ESOL Intensive ESOL Support ESE (Program)
Other

TRANSPORTATION
Needed: no yes (regular ESE lift)
Special Session Bus # SAC# 106D

RECOMMENDATION FOR SPECIAL SESSION (Check all that apply.)
Students who require more than the normal 180-day term to complete the expected course of study may attend Special Session. The following guidelines are recommended:
Flexibility for students (K-5) to allow for maintenance of skills (at grade level)
Consideration of special needs students (e.g., ADHD, ADD, ESOL, DOP, Chapter 1, etc.)
Students promoted to the next level who need "maintenance" and alternative methods to sustain their continuous progress may attend Special Session.
Students who receive a score in the first or second quartile in the reading and/or mathematics section of the CTBS/4 may be recommended, but are not required, to attend Special Session.

Note: Students retained in their current grade level may be eligible for promotion upon completion of Special Session.
[redacted] 5-17-94 Date
[redacted] 5-17-94 Signature of Principal / Date

PARENT/GUARDIAN NOTIFICATION
Yes, my child will attend the Special Session (summer school). The information on address and telephone numbers is correct or I have noted changes on my copy of the registration form.
No, my child will not attend the Special Session (summer school).
Signature of Parent / Guardian Date

Attachments to the registration form sent to the Special Session school:
Parent/guardian copy - signed registration form Copy of completed ESE IEP, if appropriate
Other information

To be completed at the conclusion of Special Session:
STUDENT ATTENDANCE RECORD: 17 Days Present 3 Days Absent Days Tardy
Teacher comments:

[redacted]
[redacted] 17/28/94
Signature of Special Session Administrator / Date

PLACEMENT DECISION
Made following Special Session
Promoted Administrative Placement Retained
Signature of Home School Principal / Date

PANEL: _____

A15. DAILY SUMMARY

YEAR: 00

Monday October 25, 1999 3:23 pm

STDT: [REDACTED]

SCHL: 1691 GR: 07 ST: A

CAL: 01

1111111111222222222233

-----ASSIGNMENTS-----

	1234567890123456789012345678901	ABS	PRS	MBR
JUL		0	0	0
AUG		0	12	12
SEP A...	1	19	20
OCT	0	16	16
NOV		0	0	0
DEC		0	0	0
JAN		0	0	0
FEB		0	0	0
MAR		0	0	0
APR		0	0	0
MAY		0	0	0
JUN		0	0	0
JUL		0	0	0
AUG		0	0	0

SCHL	ENTRY	WITHDRAWL
1691	E01 081699	

TOTAL: 001 047 048
% = 2 98

PF1=HELP 3=EXIT 7=BKWD 8=FWD 12=ESCAPE
RECORD IS DISPLAYED...NEXT?

TERML: CB16

Can you please correct this absence?

Please circulate through your team members:

✓ [REDACTED] - I had her marked absent, but I changed it in my book (if she says she was not absent, I HAVE HER MARKED ABSENT (no excuse) NOTE)
[REDACTED] NOT MARK ABSENT - JC SUB
[REDACTED] was not here + [REDACTED] did not have her marked absent

Please check your attendance for this student on 9/27/99. She says she was not absent.

Thank you

Please let me know -

FCAT 1998

Individual Profile Report

ID Number

Grade 5



School Number: 1761

District Number: 50
PALM BEACH

Run Date: 4/30/98

Total Score

The Total Score indicates the student's level of achievement on FCAT Mathematics. The Total Score that a student could achieve ranges from 100 to 500.



The Total Mathematics Score of 297 indicates that [redacted] scored in the middle third of grade 5 students who took FCAT Mathematics in 1998.

Subscores

The Subscores indicate the student's level of achievement on separate content areas of FCAT Mathematics. Each Subscore represents the percentage of content in that area that the student responded to successfully.



The *Sunshine State Standards* content tested by FCAT Mathematics is described on the back of this report.

Message to Parents:

The Florida Comprehensive Assessment Test (FCAT) is a new achievement test for Florida students. FCAT measures the *Sunshine State Standards* for reading and mathematics. Adopted in 1996, the *Sunshine State Standards* are challenging expectations for Florida students. They apply to all students whether they plan to enter the world of work or go on to further education after high school. The *Standards* signify what students should know and be able to do as they progress through school. The *Sunshine State Standards* are the foundation for a strong accountability system for Florida's schools.

FCAT was administered for the first time in Florida schools in January 1998. The 1998 test scores will set the baseline for future achievement of the *Sunshine State Standards* in reading and mathematics. FCAT scores are an overall indicator of achievement of these challenging new standards. FCAT results will not be used in making decisions concerning the promotion of students in 1998 but will be one consideration in promoting students in future years.

Mathematics Content Tested

FCAT Mathematics is an assessment of the *Sunshine State Standards* in mathematics. FCAT Mathematics assesses content from the following areas:

Number Sense, Concepts and Operations

- Identifying operations (+, -, x, ÷) and effects of operations
- determining estimates
- knowing how numbers are represented and used

Measurement

- recognizing measurements and units of measurement
- comparing, contrasting, and converting measurements

Geometry and Spatial Sense

- describing, drawing, identifying, and analyzing two- and three-dimensional shapes
- visualizing and illustrating changes in shapes
- using coordinate geometry

Algebraic Thinking

- describing, analyzing, and generalizing patterns, relationships, and functions
- using expressions, equations, inequalities, graphs, and formulas

Data Analyzing and Probability

- analyzing, organizing, and interpreting data
- identifying patterns and making predictions, inferences, and valid conclusions
- using probability and statistics

Área de contenido del examen de Matemáticas

El examen de Matemáticas FCAT es el examen que evalúa las normas educativas de Matemáticas del estado de la Florida (*Sunshine State Standards*). Este examen evalúa las habilidades siguientes:

Comprensión numérica, conceptos y operaciones

- Identificación de operaciones (+, -, x, ÷) y efectos de operaciones
- estimación de resultados
- uso y representación de números

Medidas

- reconocimiento de medidas y de unidades de medidas
- comparación y conversión de medidas

Geometría y noción espacial

- descripción, dibujo, identificación y análisis de figuras de dos y tres dimensiones
- visualización e ilustración de cambios en figuras
- uso de geometría coordinada

Razonamiento algebraico

- descripción, análisis y generalización de patrones, relaciones y funciones
- uso de expresiones, ecuaciones, desigualdades, gráficas y fórmulas

Análisis de datos y probabilidad

- análisis, organización e interpretación de datos
- identificación de patrones y elaboración de predicciones, inferencias y conclusiones válidas
- uso de probabilidad y estadística

Mensaje a los padres de familia:

La Prueba de Evaluación Comprensiva de la Florida: Florida Comprehensive Assessment Test (FCAT) es un examen nuevo diseñado para los estudiantes del estado de la Florida. El examen FCAT mide las normas educativas (*Sunshine State Standards*) de matemáticas y de lectura. Dichas normas, que fueron adoptadas en 1996, tienen expectativas altas de los estudiantes del estado y se aplican a todos los estudiantes ya sea que vayan a trabajar o que sigan con estudios universitarios después de la escuela secundaria. Las normas educativas representan lo que los estudiantes deben saber y pueden hacer en su avance académico. Las normas educativas establecen la base para un sistema que define una mayor responsabilidad para las escuelas de la Florida.

El examen FCAT fue administrado por primera vez en enero de 1998 en las escuelas del estado de la Florida. Los resultados del examen de 1998 determinarán la base para el futuro logro de las normas educativas del estado de la Florida en las áreas de lectura y matemáticas. Los resultados del FCAT son un reflejo general de estas nuevas normas educativas y sus altas expectativas. Los resultados del FCAT no se usarán en 1998 para decidir en qué grado se colocará el estudiante pero sí será uno de los factores que se considerarán en el futuro.





1997 Florida Writing Assessment
STUDENT REPORT
Grade 4

Student Name: [REDACTED]
Student I.D. No.: [REDACTED]
School: [REDACTED]
District: PALM BEACH COUNTY

TYPE OF WRITING TESTED: **WRITING TO EXPLAIN**

SCORE: [REDACTED]

Description of Writing Scores

- 6.0:** The writing focuses on the topic, is logically organized, and includes ample development of supporting ideas or examples. It demonstrates a mature command of language, including precision in word choice. Sentences vary in structure. Punctuation, capitalization, and spelling are generally correct.
- 5.5:** The writing was given a 5 by one reader and a 6 by the other reader.
- 5.0:** The writing focuses on the topic with adequate development of supporting ideas or examples. It has an organizational pattern, though lapses may occur. Word choice is adequate. Sentences vary in structure. Punctuation, capitalization, and spelling are generally correct.
- 4.5:** The writing was given a 4 by one reader and a 5 by the other reader.
- 4.0:** The writing focuses on the topic, though it may contain extraneous information. An organizational pattern is evident, but lapses may occur. Some supporting ideas contain specifics and details, but others are not developed. Word choice is adequate. Sentences vary somewhat in structure, though many are simple. Punctuation, capitalization, and spelling are usually correct.
- 3.5:** The writing was given a 3 by one reader and a 4 by the other reader.
- 3.0:** The writing generally focuses on the topic, though it may contain extraneous information. An organizational pattern has been attempted, but lapses may occur. Some of the supporting ideas or examples may not be developed. Word choice is adequate. Sentences vary somewhat in structure, though many are simple. Punctuation and capitalization are sometimes incorrect, but most commonly used words are spelled correctly.
- 2.5:** The writing was given a 2 by one reader and a 3 by the other reader.
- 2.0:** The writing may be slightly related to the topic or offer little relevant information and few supporting ideas or examples. There is little evidence of an organizational pattern. Word choice may be limited or immature. Sentences may be limited to simple constructions. Frequent errors may occur in punctuation, capitalization, and spelling.
- 1.5:** The writing was given a 1 by one reader and a 2 by the other reader.
- 1.0:** The writing may only minimally address the topic because there is little or no development of supporting ideas or examples. No organizational pattern is evident. Ideas are provided through lists, and word choice is limited or immature. Unrelated information may be included. Frequent errors in punctuation, capitalization, and spelling may impede communication.
- U:** The writing is unrelated to the assigned topic or cannot be read, or there is no response.

Your Student's Score

Dear Parents or Guardians:

The paper your student wrote in January as part of the Florida Writing Assessment Program has been read independently by two people trained to score this test. Each reader judged the paper against a set of standards and gave it an overall score. Your student's final score is the average of the two readers' scores.

This writing score will help you, your student, and the teacher understand how well your student performed on this statewide writing test. A description of each possible score is printed on the left side of this report.

Students were given 45 minutes to read the assigned topic, plan what to write, and then write their responses. The conditions under which your student writes papers in class or at home may not be the same as those for this test; therefore, the writing may not be the same. You and the teacher should consider the score on this test along with all of your student's other writing when planning activities to continue developing your student's writing skills.

DESCRIPTION OF THE TOPIC:

Students were asked to explain why everyone should know how to read.

RUN DATE: 04/19/97

50-1761-00000T402

**EVALUACION DE SECRITURA DE LA FLORIDA
PRIMAVERA DE 1997
REPORTE ESTUDIANTIL**

INFORMES DE LOS ESTUDIANTES DE 4° GRADO

Descripción de las Notas de Redacción

6.0: La redacción se concentra en el tema, está lógicamente organizada e incluye un amplio desarrollo de las ideas o ejemplos fundamentales. Demuestra un dominio maduro del idioma, incluyendo precisión en la elección de términos. Las oraciones varían en su estructura. La puntuación, uso de mayúsculas y ortografía son generalmente correctas.

5.5: La redacción recibió un 5 por parte de un lector y un 6 por parte del otro lector.

5.0: La redacción se concentra en el tema y tiene un desarrollo adecuado de las ideas o ejemplos fundamentales. Tiene una estructura organizada, aunque haya algunos lapsos. La elección de términos es adecuada. Las oraciones varían en su estructura. La puntuación, uso de mayúsculas y ortografía son generalmente correctas.

4.5: La redacción recibió un 4 por parte de un lector y un 5 por parte del otro lector.

4.0: La redacción se concentra en el tema, aunque puede contener información ajena al mismo. Es evidente una estructura organizada, aunque puede haber algunos lapsos. Algunas ideas fundamentales contienen datos específicos y detalles, pero otras no están desarrolladas. La elección de términos es adecuada. Las oraciones varían algo en su estructura, aunque la mayoría son simples. La puntuación, uso de mayúsculas y ortografía son generalmente correctas.

3.5: La redacción recibió un 3 por parte de un lector y un 4 por parte del otro lector.

3.0: La redacción se concentra generalmente en el tema, aunque contiene información ajena al mismo. Se intentó una estructura organizada, aunque puede haber algunos lapsos. Algunas de las ideas o ejemplos fundamentales pueden no estar desarrollados. La elección de términos es adecuada. Las oraciones varían algo en su estructura, aunque la mayoría son simples. La puntuación y la ortografía son a veces incorrectas pero las palabras más comunmente usadas están escritas correctamente.

2.5: La redacción recibió un 2 por parte de un lector y un 3 por parte del otro lector.

2.0: La redacción está apenas relacionada con el tema u ofrece poca información relevante, así como pocas ideas o ejemplos fundamentales. Hay poca evidencia de una estructura organizada. La elección de términos puede ser limitada o inmadura. Las oraciones se limitan a construcciones simples. Pueden encontrarse errores frecuentes de puntuación, uso de mayúsculas y ortografía.

1.5: La redacción recibió un 1 por parte de un lector y un 1 por parte del otro lector.

1.0: La redacción considera mínimamente el tema porque no hay o hay muy poco desarrollo de las ideas o ejemplos fundamentales. No hay evidencia de una estructura organizada. Las ideas aparecen enumeradas en listas y la elección de términos es limitada o inmadura. Puede aparecer información no relacionada con el tema. Los errores frecuentes de puntuación, uso de mayúsculas y ortografía pueden impedir una comunicación efectiva.

U: La redacción no tiene relación con el tema asignado, no puede leerse o no obtuvo respuesta.

Estimados padres o tutores:

La prueba escrita por su niño(a) en enero como parte del Programa de Evaluación de Redacción de Florida, fue leída independientemente por dos personas capacitadas para evaluarla. Cada lector juzgó la prueba en relación a un conjunto de normas y la calificó con una nota general. La nota final de su niño(a) es el promedio de las notas otorgadas por los dos lectores.

Esta nota de redacción le ayudará a usted, a su niño(a) y a los maestros a comprender cómo se desempeñó su niño(a) en esta prueba de redacción realizada en todo el estado. Una descripción de cada una de las notas posibles aparece en el lado izquierdo del informe.

Los estudiantes dispusieron de 45 minutos para leer el tema asignado, planificar lo que iban a escribir y escribir sus respuestas. Las condiciones bajo las cuales los estudiantes redactan otras pruebas en clase o en el hogar pueden ser diferentes a las empleadas en esta prueba; por lo tanto, la redacción puede ser diferente. Ustedes y los maestros deben considerar la nota de esta prueba junto con todas las otras redacciones del estudiante, al planear actividades para continuar desarrollando las habilidades de redacción del estudiante.

REPORT #1

CTBS/4 STUDENT REPORT

TEACHER: [REDACTED]

FOR: [REDACTED]

SCHOOL: [REDACTED]

GRADE: 04 DATE OF TESTING: 4/15/97

TEST: CTBS/4 LEVEL 14 FORM A

STUDENT NUMBER: [REDACTED]

TESTS	PERCENTILE RANKS	LOWEST	SCORE RANGES AVERAGE		HIGHEST
			LOW	HIGH	
TOTAL READING					
READING COMPREHENSION					
READING VOCABULARY					
TOTAL MATHEMATICS					
MATH CONCEPTS & APPLICATION					
MATH COMPUTATION					
SCIENCE					
SOCIAL STUDIES					
	RANGES OF PERCENTILE RANKS	1-25 PERCENTILE	26-50 PERCENTILE	51-75 PERCENTILE	76-99 PERCENTILE

Dear Parent/Guardian:

This spring, [REDACTED] was given the Comprehensive Tests of Basic Skills/Fourth Edition (CTBS/4). This report explains [REDACTED]'s test results.

When compared with students across the nation, [REDACTED]'s scores were in the low-average range on all tests taken.

Additional information about these tests can be found on the back of this page. If you would like more information about [REDACTED]'s test scores, please contact our school.

Sincerely,
Principal

SCHOOL COPY

5/07/96

NON-STANDARD ADMINISTRATION STUDENT REPORT

PAGE 189

SCHOOL: [REDACTED]

GRADE: 3

DATE TESTED: 4/17/96

20018305 [REDACTED]

TEST: CTBS/4 LEVEL 13 FORM A

PERCENT OF
QUESTIONS CORRECT



"{ }" shows the number of test questions in each objective

"---" in the percent column indicates that this part of the test was not taken



FLORIDA CERTIFICATION OF IMMUNIZATION

Legal Authority: FLORIDA STATUTES 232.032, s. 10D-3.088, F.A.C. and s. 10M-12, F.A.C.

[REDACTED] LAST NAME	[REDACTED] FIRST	MI	DOB MO/DA/YR
PARENT OR GUARDIAN	Child's SS# (optional)	STATE IMMUNIZATION ID# ¹	

Directions:

- Enter all appropriate doses and dates below.
- Sign and date appropriate certificate (A-1, A-2, B, or C) on reverse side of form.
- If the child is presenting for the 7th grade requirement only and has previously filed a Certificate of Immunization (680A or 680A-1) with their current Florida school, fill in boxed areas below and complete Part A-2 on the reverse side of this form.
- For additional information: See Immunization Guidelines for School and Child Care Facilities for information and instructions on form completion and immunization requirements. Guidelines are updated annually and are available from the local county health department.

VACCINE	DOE CODE	Dose 1 MO/DA/YR	Dose 2 MO/DA/YR	Dose 3 MO/DA/YR	Dose 4 MO/DA/YR	Dose 5 MO/DA/YR
DTaP/DTP ²	A	[REDACTED]				
DT ³	B					
Td ⁴	C					
Polio ⁵	D					
HIB ⁶	E					
MMR (Combined) ⁷	F					
(Separate) ⁸	G, H, I					
Hepatitis B ⁹	J					

- The state immunization ID# is an identifier supplied by the state immunization registry (optional).
- DTP 5 doses required. If the fourth primary dose is administered on or after the fourth birthday a fifth dose is not required. DTaP is an acceptable alternative for one or more doses of DTP.
- DT (pediatric) is acceptable if Pertussis vaccine is medically contraindicated. (Complete Part C for Pertussis contraindication.)
- Td (Adult) Vaccine is recommended for children 7 years of age or older.
- Polio 4 doses required. If the third dose is administered on or after the fourth birthday, a fourth dose is not required. IPV is an acceptable alternative for one or more doses of OPV. Polio vaccine is not required for children 18 years of age or older.
- Hib is required for child care and preschool entry and attendance only.
- 1st dose valid if given on or after 1st birthday. Second dose (measles) valid if given at least 1 month after 1st dose. A second dose of measles (preferably MMR) is required for students in grades K-4 in the 1997-98 school year; and 7th grade entry and attendance effective with the 1997/98 school year. In each subsequent year thereafter, the next highest grades are included.
- Includes single measles vaccine (G), single mumps vaccine (H) or single rubella vaccine (I).
- Hepatitis B vaccine series is required for seventh grade entry and attendance effective with the 1997-98 school year and kindergarten entry and attendance effective with the 1998-99 school year. In each subsequent year thereafter, the next highest grades are included.