

**Pinecrest Elementary Clubs
Registration Form**

Student's Name: _____ Grade Level: _____ HR Teacher: _____

Club name: _____

Parent's Name: _____ Parent's emergency phone #: _____

Parent's E-mail: _____

**Registration confirmation and all club information will be sent home via e-mail. Please be sure we have an accurate and legible e-mail on this form.

Cost:

1. <u>Program Fee</u> : Cash (EXACT AMOUNT - NO CHANGE PROVIDED) or check payable to Palmetto Adult Education Center	\$ _____
2. <u>Materials Fee</u> : Cash (EXACT AMOUNT - NO CHANGE PROVIDED) or check payable to Pinecrest Enrichment Programs Fund, Inc.	\$ _____
3. <u>Parental Contribution</u> : CASH ONLY (EXACT AMOUNT - NO CHANGE PROVIDED)	\$ 45.00

Please reference your child's name and club on your check's memo line

Please remember to bring your **child's student ID number** as it is required on the MDC Public Schools Data Input Form. Student ID numbers are not available at registration.

Registration is not complete until all fees are collected and this form is returned. You will receive an email confirming your child's registration is complete.

Behavior Contract for Club Participants

I, _____, understand that participation in _____ club is a privilege. I am here to learn in a relaxed and fun learning environment; however, if my behavior is disrespectful towards my sponsor or interferes with the learning environment of other club participants, I understand that I will no longer be able to participate in clubs. Examples of disrespectful behavior are use of profanity and unable to follow directions from your sponsor.

At all times, I must respect my teachers and peers. I understand that if I am unable to fulfill my part of the contract, the following actions will take place:

#1 Student warning

#2 Parent contacted

#3 Exclusion from participation

*Depending on the severity of the behavior, a child may be immediately removed from participating. MDCPS Code of Student Conduct is controlling and inappropriate behavior will be addressed by PES in accordance with the MDCPS Code of Student Conduct.

Student's signature: _____

Parent's signature: _____

Date _____

2017-1 CE, ESOL, AHS



MIAMI-DADE COUNTY PUBLIC SCHOOLS WORKFORCE DEVELOPMENT EDUCATION DATA INPUT FORM

School Operations (Adult/Vocational, and Community Education)

PERSONAL INFORMATION

Today's Date ____/____/____
 Month Day Year

Last Name _____ First Name _____ Middle Name _____
 (Picture ID Required)

Social Security No. _____ Student I.D. No. _____ Phone No. () _____

Date of Birth ____/____/____ Birthplace (Country or State) _____
 Month Day Year

Address _____
 Number and Street Apt. City State Zip

CITIZENSHIP STATUS (Select one) U.S. Citizen Permanent Resident Alien Non-Resident Alien Not Reported

GENDER (Select one) Female Male **ETHNICITY** (Select one) Latino or Hispanic Origin Yes No

RACE (Select all that apply) American Indian or Alaskan Native Black or African American Hawaiian or other Pacific Islander
 Asian Native White

LANGUAGE (If applicable, Select Yes or No)
 Yes No Is a language other than English spoken at your home?
 Yes No Do you have a first language other than English?
 Yes No Do you most frequently speak a language other than English?

EMERGENCY CONTACT INFORMATION

Name _____ Phone No. () _____
 Last First Middle

RESIDENCY (Select One) Florida resident (Live in State of Florida) County _____ (Leave blank if Miami-Dade)
 Non-Florida resident

Under penalty of perjury, I hereby swear or affirm that the information presented on this form is true.

X _____ (Signature)

If you do not want your directory information released without prior written consent, please check the box on the right.

EDUCATION

Highest School Grade Completed (Select One)
 No school grades completed Completed some college, but did not earn a certificate or degree
 Completed at least part of 1st through 11th grade Earned a Career Certificate
 Highest grade completed: _____ Earned an Associate of Applied Sciences degree
 Completed the twelfth grade, but did not attain a diploma Earned an Associate of Science degree
 or equivalency Earned an Associate of Arts degree
 Earned a high school diploma - Date _____ Earned a Bachelor's degree
 Earned a high school equivalency - Date _____ Attained beyond a Bachelor's degree
 Have a disability and attained a special diploma or high school Current H.S. Student Grade Level _____ ISIS ID # _____
 certificate of attendance/completion from completing an (9-12)
 Individual Education Plan (IEP)

Where was this level achieved? U.S. Based Not U.S. Based

Students with special needs may be eligible for course and testing accommodations. See an adult/vocational education counselor for information and assistance.

Miami Palmetto Adult and Community Education

Refund Policy

Term: _____ Site _____ Date _____

Student Name _____ ID Number _____

NEW REFUND POLICY –

1. Full refunds are not made unless requested prior to the second activity session. Prorated refunds after the second activity day are made only upon recommendation of the assistant principal for community education and approved by the principal. If extenuating circumstances exist, assistant principals for community education may recommend a full refund, subject to the approval of the school principal and district office. The refund request must be supported by a School Board receipt number or verified through the vocational adult registration system. All requests for refunds must be initiated by the student / parent, recommended by the assistant principal for community education, and approved by the school principal. All refunds must be made by check.

The principal or designee may issue a refund or credit in a fee supported program for unused portions of a payment period. Refunds and credits issued are indicated on the back of the before / after-school care / pre-K registration card and the regular community school card.

2. Refunds are issued when it is necessary to cancel an activity due to administrative reasons. The assistant principal for community education may recommend a full refund or may calculate the per session cost and grant a refund for only the sessions which have not met.
 3. If a student is withdrawn for disciplinary reasons, no refund is made.
 4. Applications for refunds and documentary evidence of all students shall be retained for audit purposes at the community school.
- **Visit our web page for the full refund policy, WWW.palmettoadulthood.com**

I have been informed of the Refund Policy.

Student / Parent Signature

Date