Admit Slip: 2-part NCR (5.5" x 3") Inventory ID: 006051 100 per package

FCPS Frederick County Public Schools		ADMIT SLIP
DATE:		CODE:
	NAME OF STUDENT	
ARRIVED AT SCHOOL AT		(TIME OF ARRIVAL
NOTE ATTACHED YES	BUS DELAYED	

FCPS Frederick County Public Schools	
Student:	
Has permission to ride BUS#:	
To/With:	
On (Date):	
Authorized Signature	CS-SEP2011

Bus Pass: Pad (5.5" x 4.25")

Inventory ID: 006034 50 sheets per pad

Detention Assignment: 2-part NCR (8.5" x 11") Inventory ID: **006035** 50 per package

DETENTION ASSIGNMENT				
NAME GRADE				
s ti	report for detention onas a result of			
	HE ABOVE NAMED STUDENT MISSES ANY OF THE ASSIGNED DETENTIONS, IS LATE OR CAUSES A DISRUPTION, HE/SHE MAY			
BE:	☐ REFERRED TO AN ADMINISTRATOR ☐ ASSIGNED TO SATURDAY SCHOOL			
	DETENTION RULES			
3.	Students must report no later than a.m./p.m. Students who arrive late may not be admitted and may be referred the appropriate administrator Students are required to bring perus, perceivable, tools and school refeded assignments to deterition. Students are required to the perus take throughout the acceptability, tools and school refeded assignments to deterition. Students are required to the school refeded and the students are supported to the school refeded and the forms of belower that distance others will not be beforeted large and derivating are not allowed. All electronic devices must be powered off. If the students is about not the school reference to the school refeded to the school reference to the school re			
	TRANSPORTATION			
	ase note that school bus transportation is not provided for before- or after-school detention. Transportation to and from the ention assignment is the parent's responsibility.			
det MY	SIGNATURE BELOW INDICATES THAT I HAVE RECEIVED A COPY OF THIS DOCUMENT, HAVE REVIEWED IT WITH			
det MY	SIGNATURE BELOW INDICATES THAT I HAVE RECEIVED A COPY OF THIS DOCUMENT, HAVE REVIEWED IT WITH ADMINISTRATOR, UNDERSTAND THE RULES AND AGREE TO SHOW THIS FORM TO MY PARENTS THIS EVENING			
MY				
MY AN	ADMINISTRATOR, UNDERSTAND THE RULES AND AGREE TO SHOW THIS FORM TO MY PARENTS THIS EVENING			
MY AN Stu	ADMINISTRATOR, UNDERSTAND THE RULES AND AGREE TO SHOW THIS FORM TO MY PARENTS THIS EVENING dent's Signature Date			

	DHOOL:	EVENT:			
ï	TICKET REVENUE CALCULATION:				
	A Adult Tirkets				
	Ending Number				
	Beginning Number				
	Total Sold	х			
	B. Student Tickets		(Ticket Rate)		(Adult Revenue)
	Ending Number				
	Beginning Number				
	Total Sold	Х			
	C. No-Charge		(Ticket Rate)		(Student Revenue)
	C. No-Charge Ending Number				
	Beginning Number				
	Total Issued	Х	N/A	-	N/A
	D. Online Tickets Sold				
	Adult Tickets	х	(Ticket Rate)		
	Student Tickets	x			
	Total Online Sold		(Ticket Rate)		
	(PLEASE INCLUDE A COPY OF THE CHECK PAY	OUT REPORT)			
I.	TOTAL TICKET REVENUE			s _	
		•••••	000000000000000000000000000000000000000	•••••	000000000000000000000000000000000000000
II.	CASH RECONCILIATION:			5	
	Check # (ONLINE SALES)				
	Hundreds =	X	\$100.00		
			\$ 50.00		
	Twenties =		\$ 20.00 \$ 10.00		
	Fives =	X	\$ 5.00 \$ 1.00		
	Fifty Cents =		\$ 1.00		
	Quarters =		\$.25		
	Dimes =		\$.10		
	Nickels =	^	\$.05		
	Pennies =	^	\$.03		
	Total Cash in Cash Box	^			
	Less: Beginning Cash			\$_	
	CASH REVENUE				
	LASH KEVENUE			s =	
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to			T TICKET)		
to	TAL REVENUE SS REVENUE FOR BOE ATHLETIC ADULT GATE RECEIP (ACCT CODE 21340-10-0102-013-88-00000)		T TICKET)	 s	
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TO LE	TAL REVENUE SA REVENUE FOR BOE ATHLETIC ADULT GATE RECEIP (ACCT CODE 21340-10-0102-013-88-00000) TOTAL REVENUE FOR ATHLETIC DEPARTMENT	TS (\$2 PER ADUL	***************************************		***************************************

**Gate Receipt Reconciliation:** 

3-part NCR (8.5" x 11") Inventory ID: **006032** 25 per package

Hall Pass:

Pad (5.5" x 2.75") Inventory ID: **006031** 50 sheets per pad

•	
DATE ISSUED:	
FROM:	
TO:	
TIME:	
	DATE ISSUED: FROM: TO: TIME:

**High School Admit/Attendance Slip:** 2-part NCR (5.5" x 3")

Inventory ID: **006026**100 per package

<b>FCPS</b>	TEACHER'S SIGNATURE BY PERIOD
rederick County Public Schools	I.
Name:	_
Date Absent/Dismissed/Late:	2.
Date Issued:	
Code:	3.
Time:	
Authorized by:	4.

Internal Deposit Slip: 3-part NCR (3.666" x 8.5") Inventory ID: **006022** 100 per package

INTE	RNAL DEPOSIT SLIP
SCHOOL	
Date	
Account Name	
Source of funds bein	g deposited
Amount – Currency	s
Coins	
Checks	
Total of Deposit	s
Teacher	signature
Bookkeeper	signature
Please complete the sales.	following if the deposit consists of taxable
Total Collected	s
Taxable Sales	s
Sales Tax Collected	\$(6% of taxable sales)

Late Pass: 2-part NCR (4.25" x 2.75") Inventory ID: **006025** 100 per package

FCPS Frederick County Public Schools	LATE PASS		
		DATE	
STUDENT			
TIME			
TEACHER			
reason		CS-SFP2011	
		C5-5EP2011	

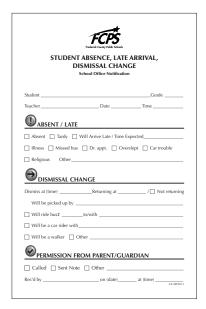
Out of School Pass: 2-part NCR (5.5" x 3") Inventory ID: **006052** 100 per package

FCPS OUT-	OF-SCHOOL PASS
NAME:	HAS PERMISSION
TO LEAVE SCHOOL AT:	(TIME) FOR THE FOLLOWING
PURPOSE:	
NOT EXPECTED TO RETURN TODAY:	
EXPECTED TO RETURN AT:	(TIME) TODAY

Saturday School Contract: 2-part NCR (8.5" x 11") Inventory ID: **006036** 50 per package

Is to report for Saturday School on	America Community Coloreda				
is to report for Sahurday School on		SATURDAY SCHO	OOL CONTRACT		
1. Standary School will be from a.m. to a.m. and will be held in a.m. to gain en a.m. to a.m. and will be held in a.m. to a.m. to a.m. and will be held in a.m. to a.m. to a.m. to a.m. to	NAI	ME	GRADE		
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Students are to report to		SATURDAY SCHOOL GEF	NERAL INFORMATION		
to the building Students arming liter will not be admitted. Early differential arm out allowed.  Standards School created if student of code lid gor of cone using in 1970, when the or increment weather. Sat Schools and student lives a no. or Standards  SATURDAY SCHOOL RUE!  Students are required to live line, pracricle, books and school exited assignments to deteration, who may assigned if the school proposed proposed schools and school exited sangements to deteration. Work may assigned if the school to the proposed school and school exited assignments to deteration, who may assigned a student trongs once. Schoolers are exercised to be not taken broughout the assignment assigned from the school to the school of the schoo	1.	Saturday School will be froma.m. toa.m. a			
School is also carcelled if the tone emergency pain is in effect by 6 a.m. on Saturday.  SATURDAY SCHOOL RULES  THE SATURDAY SCHOOL THE SATURDAY		to the building. Students arriving late will not be admitted	I. Early dismissals are not allowed.		
SATURDAY SCHOOL RULES  SUBJECT are required to being perm, percitly, books and school existed assignment to deteration. Work may be suggested fine scudent brongs room. Subsens are executed to be not not throughout the assignment fine.  I start and the second of the school of the second of the school of the sc	2.				
1. Students are required to long pen, pencils, looks and chool entered assignments to detection. When any assigned if the student being none. Students are expected to be not strengthed the students for students. Students are expected to demonstrate appropriate behavior. Stepring, tabling, making prices, leaving an assignated of the format of herbitors and chools are students and control of herbitors and students are students. Students and the students are students and the students are students and the students. Students are students are premisted.  3. No food or drinks are premisted.  5. Use of library materials must be arranged with permission from staff.  5. Use of library materials must be arranged with permission from staff.  6. Office of library materials must be arranged with permission from staff.  7. Other.  7. Other.  7. Other.  7. Other.  7. Other.  7. Other.  8. Refusal to follow the proctor's requests and/or any disruptive behavior may result in immediate removal for a students staff or a minimum of		school is also cancelled if the snow emergency plan is in e	nect by 6 a.m. on Saturday.		
assigned if the student brings room. Students are expected to be not set throughout the suggest time.  Students are expected to demonstrate apported behavior. Sleepin, sleep, makes possin, serving an assistant and the students of the stud		SATURDAY SCI	HOOL RULES		
2. Students are expected to demonstrate appropriate behavior. Stepring, tables, making noise, itsuring an assist and other forms of histories will not be their stepring the state of the forms of histories and other forms of histories will not be their state of the	1.				
seal and other forms of hathwort hat distract others will not be beforeted. Exercinic devices must be power and may be confident of they are not.  8. Restrone provinger must be requested through the proctor.  8. Restrone provinger must be requested through the proctor.  8. Restrone provinger must be requested through the proctor.  8. Extraction provinger must be requested through the proctor.  9. Constitution of the proctor's requests such such that shadows is critical in writing by a dictor.  1. Restricts to follow the proctor's requests such of any advance to certified in writing by a dictor.  1. Restricts to follow the proctor's requests such of any advance to constitution may result in immediate removal for the result of the student of the st	,				
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A Retinous privileges must be requested through the protots.  Low of listory materia must be arranged with permission from staff.  Low of listory materia must be arranged with permission from staff.  Other  Control Strately (School to vascospitation uses the absence to extilled in writing by a dictor.  Other  To Chief  Refusal to folious the protoch's requests and/or any disappive behavior many ensult in inemediate removal from the control of the staff of the staff of the control of the control of the staff of the control of					
6. Advance from Saturday School is unaccapitable unless the absence is certified in writing by a dector.  CONSEQUENCES  1. Refault to follow the proctor's requests and/or any disaughts behavior may result in immediate removal from Saturday School. A responsible attempt will be used to notify the submitted spatiently gashed to his contribution of the state of the submitted better removal.  2. If the student fails to attend the assigned Studiedy School, it late or causes a disruption, he/the may be support out of school for a minimum of					
7. Other: CONSQUENCES  1. Refund to follow the proctor's requests and/or may discussive between may result in immediate, remood for standards (should. A reasonable attempt will be made to madily the student's parent/guardian that the student been remood. For the student's parent/guardian that the student been remood for the student's parent/guardian that the student been remood for instrument					
1. Indicate to folious the protecty's requests and/or any disorphic behavior may result in immediate removal disordarialy action of accomplete attention of the student been removed.  1. Of the student facts to street of the surgicusd Saturday School, is late or causes a disruption, he/she may be supported from the student facts of the promotion from Saturdaviolation that student facts for the promotion from Saturdaviolation facts of the student facts for the promotion for the student facts of the student fac			absence is certified in writing by a doctor.		
Sandary Srood. A responsible strengt will be made to notify the student's parent/guardian that the student been removed.  2. If the student fails to strend the susigned Sandary School, is late or causes a disruption, he/she may be supported out of school for in minimum of the Sandary School (and the student Sandary School). The supportation is not provided for Saturday School. Transportation to and from Satura School is the parent's responsibility.  MY SIGNATURE BLOW MIGICATES THAT I HAVE RECEIVED A COPY OF THIS DOCUMENT, MAYE REVIEWED IT WE ADMINISTRATION. UIDERSTAND THE RULES OF SATURDAY SCHOOL AND AGREE TO SHOW THIS FORM TO MY P THE EVENING.		CONSEQU	JENCES		
been missed.  If the student fails to stated the assigned saturably Xchool, is late or causes a dougation, he/she may be supported. If the student fails of stated for a missean of	1.	Refusal to follow the proctor's requests and/or any disrup	tive behavior may result in immediate removal from		
2. If the suddent fails to attend the assigned sturring school, is late or causes a disruption, he/she may be augo und of school for a minimum of			tify the student's parent/guardian that the student has		
Please note that school but transportation is not provided for Statistics School. Transportation to and from Saturi- school in the parent's responsibility.  WY SIGNATURE SECON WINGCATES THAT I HAVE RECEIVED A COPY OF THIS DOCUMENT, MAY EXPENDED IT WE ADMINISTRATION, UNDESTAND THE RULES OF SATURDAY SCHOOL AND ARREE TO SHOW THIS FORM TO MY PTITLE EVENING.	2.	If the student fails to attend the assigned Saturday School	, is late or causes a disruption, he/she may be suspended		
Please note that school bus transportation is not provided for Saturday School. Transportation to and from Satur Schools the parent's responsibility.  WE SCHOOL RESERVE ON THE SCHOOL S		out of school for a minimum of days.			
School is the parret's responsibility.  WY SIGNATURE BELLOW INDICATES THAT HAVE ELECTIVED A COPY OF THIS DOCUMENT, HAVE REVIEWED IT WE ADMINISTRATION, UNDESTRAID THE RULES OF SATURDAY SCHOOL AND AGREE TO SHOW THIS FORM TO MY P THE CYCRING.		TRANSPOR	RTATION		
ADMINISTRATOR, UNDERSTAND THE RULES OF SATURDAY SCHOOL AND AGREE TO SHOW THIS FORM TO MY P THIS EVENING.			Saturday School. Transportation to and from Saturday		
ADMINISTRATOR, UNDERSTAND THE RULES OF SATURDAY SCHOOL AND AGREE TO SHOW THIS FORM TO MY P THIS EVENING.	MV	SIGNATURE BELOW INDICATES THAT I HAVE RECEIVED A	CORV OF THE DOCUMENT HAVE REVIEWED IT WITH AN		
	THE	5 EVENING.			
	_				
Student's Signature Date	Stu	dent's Signature	Date		
	_				
Administrator's Signature Date		ninistrator's Signature	Date		

Student Absence, Late Arrival, Dismissal Change: Pad  $(5.5'' \times 8.5'')$  Inventory ID: 006033 50 sheets per pad



**Student Detention Notice From Teacher:** 3-part NCR (8.5" x 5.5")

Inventory ID: **006027**100 per package

Student			Grade
Detention Date		Detention Room #	Detention Time
Teacher		Class	
NOTE:	Disruptive in class (see note) No class materials; repeated Other (see note)		Failure to complete class assignment(s) Make-up of test Tutorial help Class enrichment Other (see note)
	indicates that I have received a co		ce and agree to show this notice to my parents/

#### Permission to Report to Guidance:

Pad (5.5" x 3.25") Inventory ID: **006029** 50 sheets per pad

	Date		20
			has an appointment
vith		at (time):	
Signature approv	al		
ignature approv	al		

	STUDENT'S P	ERSON	IAL C	DATA		STUDENT RECORD  CARD 1 SIDE 1  Maryland State Department of Education Revised SY 2019-2020			
First Name:					Date of Birth:				
Middle Name:					SASID:				
Last Name:					LOCID:				
Preferred Name:			Gender:	Male ☐ Female ☐ Non-Binary					
Ethnicity:	☐ Hispanic/Latino ☐ Not Hispanic/Latino			Proof of Residency	g: (Include a copy) □ Yes □ No				
Race: (Check all that apply)	☐ American Indian or Alaska Native ☐ Native Hawaiian or Other Pacific Islander		ck or African American ite	F1 or J1 Visa Status for applicable secondary students: (For LSS purposes ONLY) □ Yes □ NA					
				RTH VERIFICATION					
□ 1. Birth Certificate □ 7. Birth Registration	☐2. Passport/Visa ☐3. Physicial ☐3. Other (specify):	n's Certificate	□4. Ba	ptismal or Church Certificate	☐5. Hospital Certific	ate   G. Parent's/Guardian's Affidavit			
Evidence of Birth Verifi	ed by:			List all languages spoken in the home:					
Title:	Date:								
	STUDENT	ADDRESS A	ND PAR	ENT/GUARDIAN INFOR	MATION				
Date:			Date:						
Student Address 1:				Student Address 2:					
Student's Phone:				Student's Phone:					
Responsible Adult for Student at Address:			Responsible Adult for Student at Address:						
Relationship to Studen				Relationship to Student:					
	ner than responsible adult above)			Parent/Guardian (if other	than responsible adu	lt above)			
Name:				Name:					
Relationship:				Relationship:					
Address:				Address:					
Phone:				Phone:					
Date:				Date:					
Student Address 3:			Student Address 4:						
Student's Phone:				Student's Phone:					
Responsible Adult for Student at Address:			Responsible Adult for Student at Address:						
Relationship to Studen				Relationship to Student:					
	her than responsible adult above)			Parent/Guardian (if other	than responsible adu	lt above)			
Name:				Name:					
Relationship:				Relationship:					
Address:				Address:					
Phone:				Phone:					

Student Record Card 1
(Personal Data/Attendance Information):

Double-sided form (11" x 8.5")
Inventory ID: 006037

50 per package

			STUDE	NT'S	SCH	IOOL	ATTE	NDA	NCE	DATA	ı			CARD 1 nd State I	SIDE 2 Department of Education I SY 2019-2020
First Na											Date of Bi	rth:			
Middle	Name:										SASID:				
Last Na											LOCID:				
Preferr	ed Name:														
YFAR	GRADE LEVEL	LSS	SCHOOL		DAYS		ENTRY INFORMATION						EXIT	INFOR	MATION
TEAR		#	NAME/NUMBER		Absent Present		Status & Month		Day Fron		n Status & Code				То
Re First Etraly isto Any School  - Translation plan another School  - Translation plan another School  - Translation plan another School  - Order School  - Translation plan another School  - Translation school  - Correptional High School Program			01 = Fi 02 = Ci 08 = Ri 09 = Ri 10 = Si 13 = Mi 14 = Ui 15 = Di 16 = Mi 17 = Ei 21 = Ei 22 = Mi 24 = Hi	Typ Transfer Codes Fest Ethiny Codesian Fest Ethiny Codesian Fest Ethiny Codesian Fest Ethiny Fest Eth				Exit Codes 30 - Tillous 30 - Tillous 31 - Tillous 32 - Local printer 33 - Local printer 33 - Local printer 34 - Local printer 35 - Mary Service 36 - Experiment Computery Age of Attendant 40 - Equality 41 - Tillous 41 - Tillous 42 - Tillous 43 - Tillous 43 - Tillous 43 - Tillous 44 - Tillous 50 - Indi Accessing Educational Services			ndance	70 - Early College Admission			

	Student Name		 Date
	Student Name		Date
Referring Teac	her	Homeroom Teacher	Detention Teacher
REASON FOR DETENTION	:		
Academic:			
Please sign and return to te	achari		

Recess Detention Notice: 3-part NCR (8.5" x 5.5") Inventory ID: **006028** 100 per package

First Name Middle Nar Last Name Preferred I					HE	ALT	H S	CRI	ENI	NG							SIDE 1 artment of Education ( 2019-2020
Last Name																ate of Birth:	
															s	ASID:	
Preferred I	s .														L	OCID:	
	Name:															3 504	IEP
			IDE	NTIFIED HE	ALTH	CONC	ERNS	:							ALLERGIC	TO:	
								ONAL	VISION		EENING	B					
Date	Grade Level	P	F	Date of Notification	No G	No Glasses	es Glad	asses	Bala	nce Nea	Colo				Comme Include date, sign		
Date		Р			к	L	. к	L	Far	Near	Coso	-		-	uncuae aate, sign	acure, and title)	
				HEARIN			S					ОТІ	HER H	EALTH T	ESTS, EVALUAT	IONS, OR HOS	PITALIZATIONS
Date	Grade Level	P	F	Date of Notification	Hea R	ring	1	notude	Comm date sign		and title)		Dat	æ	Grade Leve	el Foli	ow-up Needed
							- (-									□ Ye	s 🗆 No
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	ROUTIN	F PHY	/STCA	FXAM				ROU	TINE DE	ΝΤΔΙ	FXAM						
Date		Grade		Follow-up Needed	,		Date	T	Grade Le	$\overline{}$	Follow			The follo	owing forms must	FORMS be filed in studen	t's record:
				□ Yes □ N								□ No			Schools Record of		
				□ Yes □ N		L						□ No			Immunization (MD		
				DYes DI		L						□ No		Blood Le	ad Testing Certifica	te (if required)	

Student Record Card 5 (Vision/Hearing Screening): Double-sided form (11" x 8.5") Inventory ID: 006053 50 per package

Н	EALTH SO	ND EVALUATIONS CARD 5 SIDE	Maryland State Department of Education					
First Nan	ie:		Date of Birth:	Date of Birth:				
Middle N	ame:		SASID:					
Last Nam	e:		LOCID:					
Preferred	Name:							
Date	Grade Level	Comments	Name/Title					