

## Portable Assisted Study Sequence (PASS)

# Student Application

### Student Information

Student Last Name	First	M.I.	Date of Birth	Age
			Student I.D.	
Migrant Status	Q.A.D.		Current Grade	<input type="checkbox"/> Female <input type="checkbox"/> Male
Current Address			Home Phone	Message Phone
			Permanent Mailing Address	

At least 7<sup>th</sup> grade reading level  Yes  No      Student has taken previous PASS course  Yes  No  
 HS Credits earned to date \_\_\_\_\_ Credits required for graduation \_\_\_\_\_ Projected graduation date \_\_\_\_\_

### School Information

Current School and Address	Home Base School and Address (if different)
	Contact Person
Phone                      Fax	Phone                      Fax

### Course Information

Course Title
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### Credit Information

School granting credit <input type="checkbox"/> Home base <input type="checkbox"/> Current local school <input type="checkbox"/> Other (specify) _____	
Credit to be awarded <input type="checkbox"/> Full credit <input type="checkbox"/> Partial <input type="checkbox"/> Non Credit	Reason <input type="checkbox"/> Credit deficiency <input type="checkbox"/> Remediation <input type="checkbox"/> Promotion <input type="checkbox"/> Self improvement <input type="checkbox"/> Other _____

### Mentor/Instructor Information

Name
Address
Telephone
School and Address
School Telephone

### Signatures

Student Signature	Date
Mentor/Instructor Signature	Date

**PASS Program**  
**Portable Assisted Study Sequence**

**GRADE REPORT**

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

School: \_\_\_\_\_

Mentor/Instructor: \_\_\_\_\_ Program: \_\_\_\_\_

Course Title: \_\_\_\_\_

Transcript Forwarding Information: \_\_\_\_\_

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<b>Unit #</b>	<b>Grade</b>	<b>Date of Completion</b>	<b>Initial</b>
1			
2			
3			
4			
5			
Final Grade			

Signature Mentor/Instructor \_\_\_\_\_ Date \_\_\_\_\_