

**WI PASS PROGRAM
PASS/MINI PASS PROGRAM ENROLLMENT FORM
(PORTABLE ASSISTED STUDY SEQUENCE)**

- A. Complete enrollment form with student and parent
- B. Contact home base school
- C. Select course with student
- D. Submit copy to state PASS Office
- E. Order Course

A. STUDENT DATA

| | | | | | | |
|---------------------------------------|-------|-------|---------------------------|----------------------|------------------------------|---|
| NAME | LAST | FIRST | M.I. | STUDENT MSRTS NUMBER | GRADE | MIGRANT STATUS |
| PRESENT (LOCAL) ADDRESS NO. & STREET | | | DATE OF BIRTH | AGE | PLACE OF BIRTH - CITY, STATE | |
| CITY | STATE | ZIP | HOME PHONE NO. MESSAGE | | | PRIOR PASS ENROLLMENT YES NO |
| PERMANENT (HOME BASE) MAILING ADDRESS | | | CITY | STATE | ZIP | |
| PARENTS/GUARDIANS: FATHER - LAST | | | FIRST | M.I. | MOTHER - LAST | FIRST |
| | | | | | | M.I. |

B. HOME BASE SCHOOL DATA

| | |
|--|----------------|
| SCHOOL NAME | COUNSELOR NAME |
| CITY | STATE |
| PHONE NO. | DATE CONTACTED |
| CONTACT PERSON'S NAME | |
| HOME BASE PRIORITY OF COURSE RECOMMENDATIONS | |
| 1. | 2. |

C. SCHOOL TO GRANT CREDIT

| | | |
|------------------|----------------------|------------------|
| HOME BASE SCHOOL | CURRENT LOCAL SCHOOL | OTHER (Specify): |
|------------------|----------------------|------------------|

D. COURSE SELECTION

| | | |
|-------------------------------|---------------|----------------|
| STUDENT'S FIRST COURSE CHOICE | SECOND CHOICE | COURSE ORDERED |
|-------------------------------|---------------|----------------|

E. COMMENTS OR ADDITIONAL INFORMATION ON ABOVE DATA

COMMENTS:

F. LOCAL PROJECT DATA

| | |
|-------------------------------|-------|
| PROJECT NAME | PHONE |
| PASS/MINI PASS CONTACT PERSON | |
| DATE | |