

# Largo High School



410 Missouri Avenue

(727) 588-3758

FAX (727) 588-4037

Michelle Parcel, Sr. DMT ..... [parcelm@pcsb.org](mailto:parcelm@pcsb.org) ext 2007

Office Hours 7:00 a.m. to 2:00 p.m.

## **Registration Checklist:**

### **Pinellas County Public School Transfers**

1. Make a reservation at:  
Pcsb.org under the student reservation system with a username and password obtained from any Pinellas County Public School
2. Two (2) proofs of residency
  - Utility (water, electric, cable)
  - Lease/mortgage papers
  - County tax records with homestead exemption
3. Withdrawal form and grades from previous school of attendance

### **Non-Pinellas County Public School transfers**

(private school, In Florida-outside of Pinellas County; out of state and out of country)

1. Make a reservation at:  
  
Pcsb.org under the student reservation system with a username and password obtained from any Pinellas County Public School
2. Two (2) proofs of residency
  - Utility (water, electric, cable)
  - Lease/mortgage papers
  - County tax records with homestead exemption
3. Withdrawal form and grades from previous school of attendance
4. High school transcripts which include standardized testing
5. Birth Certificate
6. Immunization records on the Florida FL680 form
7. Physical signed by a licensed physician dated within the past 12 months
8. Social Security Card (optional)

**PINELLAS COUNTY SCHOOLS  
K-12 STUDENT REGISTRATION FORM**

STUDENT'S LEGAL NAME (LAST)		(FIRST)	(MIDDLE)	MALE _____ FEMALE _____
STUDENT'S ADDRESS - NUMBER, STREET & APT / LOT		CITY	ZIP CODE	SCHOOL
			GRADE	DATE / /
DATE OF BIRTH	PLACE OF BIRTH (CITY, STATE, COUNTRY)	HISPANIC / LATINO? <input type="checkbox"/> YES <input type="checkbox"/> NO (MUST CHECK AT LEAST ONE) <input type="checkbox"/> WHITE <input type="checkbox"/> INDIAN ALASKAN <input type="checkbox"/> ASIAN <input type="checkbox"/> BLACK <input type="checkbox"/> HAWAIIAN PACIFIC ISLANDER		
				<b>FOR OFFICE USE ONLY</b>
				STUDENT ID NUMBER
HAS STUDENT EVER ATTENDED A PINELLAS COUNTY SCHOOL? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SCHOOL NAME _____ IF NO, NAME, CITY AND STATE OF LAST SCHOOL _____				ENTRY CODE/DATE
HAS STUDENT EVER BEEN RETAINED? <input type="checkbox"/> YES <input type="checkbox"/> NO GRADE _____ SCHOOL _____		DOES STUDENT RECEIVE SPECIAL EDUCATION SERVICES? IEP/EP <input type="checkbox"/> YES <input type="checkbox"/> NO 504 <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> PROOF OF IDENTITY/AGE <input type="checkbox"/> PHYSICAL <input type="checkbox"/> FL IMMUNIZATION
*STUDENT SOCIAL SECURITY NUMBER (OPTIONAL)				<input type="checkbox"/> PROOF OF ADDRESS 1 <input type="checkbox"/> PROOF OF ADDRESS 2
MOTHER'S NAME/LEGAL GUARDIAN (CIRCLE ONE)				<input type="checkbox"/> HLS SURVEY FORM
HOME ADDRESS (IF DIFFERENT FROM STUDENT)				<input type="checkbox"/> RECORDS REQUESTED DATE _____
MOTHER/LEGAL GUARDIAN PHONE #		EMAIL		<input type="checkbox"/> RECORDS RECEIVED DATE _____
FATHER'S NAME/LEGAL GUARDIAN (CIRCLE ONE)				<input type="checkbox"/> IEP <input type="checkbox"/> EP <input type="checkbox"/> 504
HOME ADDRESS (IF DIFFERENT FROM STUDENT)				*Section 229.559, Florida Statutes, requires the school district to request Social Security numbers from students registering in public schools. Social Security numbers are not required as a condition of enrollment or graduation. If you do not wish to provide the school with the student's social security number, you must inform the school in writing so that an alternate identification number can be assigned, as per state statute.
FATHER/LEGAL GUARDIAN PHONE #		EMAIL		
NAME OF STEPPARENT (IF APPLICABLE)				
STEPPARENT HOME ADDRESS (IF DIFFERENT FROM STUDENT)				
NAME OF EMERGENCY CONTACT				
EMERGENCY CONTACT PHONE				
CHILD LIVES WITH? <input type="checkbox"/> BOTH PARENTS <input type="checkbox"/> LEGAL GUARDIAN <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> STEPMOTHER <input type="checkbox"/> STEPFATHER				
IS THERE ANY COURT ORDER RESTRICTING ACCESS TO THE STUDENT AND/OR TO THE STUDENT'S RECORDS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PROVIDE THE SCHOOL WITH A CERTIFIED COPY OF THE COURT ORDER.				
IS THE ENROLLMENT DUE TO A NATURAL DISASTER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, IS THE SCHOOL CLOSED? <input type="checkbox"/> YES <input type="checkbox"/> NO				
PURSUANT TO FLORIDA STATUTE 1006.07: HAS YOUR CHILD EVER BEEN EXPELLED FROM A PREVIOUS SCHOOL? <input type="checkbox"/> YES <input type="checkbox"/> NO HAS YOUR CHILD EVER BEEN ARRESTED RESULTING IN A CHARGE, OR HAVE THERE BEEN ANY JUVENILE JUSTICE ACTIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO HAS YOUR CHILD EVER BEEN REFERRED FOR MENTAL HEALTH SERVICES? <input type="checkbox"/> YES <input type="checkbox"/> NO  IF YES, PLEASE PROVIDE DETAILS _____				

SIGNATURE OF PARENT/ LEGAL GUARDIAN \_\_\_\_\_

DATE \_\_\_\_\_

# Largo High School

---

Bradley W. Finkbiner, Principal

## Guidance Registration Agreement:

As part of the registration process here at Largo High School (LHS), we want to ensure every student that has either a 504 plan or an IEP plan is accommodated for. Although LHS requests information from the student's past school in regards to these plans, we want notification and understanding from the parent/guardian as well. Please select one of the following boxes:

- My son/daughter has an active **504 plan**
  - My son/daughter has an active **IEP plan**
  - My son/daughter does **NOT** have a 504 or IEP plan
- 

When a new student enrolls at LHS, records are requested from the previous school for the student's current grades, current schedule, testing history and unofficial transcript. This process can sometimes take longer than expected when waiting to hear back from the other school for that information. If a student's information is not here by the time the student enrolls at LHS, their school counselor will place the new student in classes according to the student's current grade level. This could mean a student may be placed in a course they already took or are not prepared for. If this occurs, the school counselor will change the schedule once the transcript is received. As a parent/guardian:

- I have read the above information and want my son/daughter to start taking classes here even if the requested information from the other school is not here yet.
- I have read the above information and will wait on my son/daughter to start classes here until that information is sent Largo High School.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

410 Missouri Ave., Largo, FL 33770

Ph. (727) 588-3758 Fax (727) 588-4037 E-mail: [Largo-hs@pcsb.org](mailto:Largo-hs@pcsb.org)

The School Board of Pinellas County, Florida, prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age sexual orientation or disability in any programs, services or activities.

[www.pcsb.org](http://www.pcsb.org)

PINELLAS COUNTY SCHOOLS  
HOME LANGUAGE SURVEY

**ADMINISTER FOR EACH NEW STUDENT ENROLLING IN A FLORIDA PUBLIC SCHOOL FOR THE FIRST TIME**

Student's Last Name \_\_\_\_\_ Student's First Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Date Entered U.S. Schools \_\_\_\_\_ School \_\_\_\_\_ Current Grade \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Country of Birth \_\_\_\_\_

**The information provided on this form is used solely to offer appropriate educational services, not for determining legal status or for immigration purposes.**

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

- a. Is a language **other than English** spoken at home? **Yes** \_\_\_ **No** \_\_\_ What language? \_\_\_\_\_
- b. Does the student have a first language **other than English**? **Yes** \_\_\_ **No** \_\_\_ What language? \_\_\_\_\_
- c. Does the student most frequently speak a language **other than English**? **Yes** \_\_\_ **No** \_\_\_ What language? \_\_\_\_\_

**ANY "YES" ANSWERS WILL RESULT IN TESTING TO DETERMINE ELIGIBILITY FOR ESOL SERVICES. BECAUSE OF THE LARGE NUMBER OF STUDENTS TO BE TESTED, THERE MAY BE A DELAY IN TESTING OF UP TO 4 WEEKS. CLASSROOM TEACHERS WILL ADJUST THEIR INSTRUCTION TO MEET THE ELL STUDENT'S NEEDS. EVEN IF YOUR CHILD IS IDENTIFIED AS AN ELL, YOU MAY DECLINE THE PLACEMENT INTO ESOL CLASSES.**

\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**SCHOOL USE ONLY**

**If answers to above questions are all NO:** file Home Language Survey in cum folder

**Any YES responses, K-12:** Code LP on ELL Tab in FOCUS. Give HLS to ESOL Teacher or send to ESOL Office for testing

**Any YES responses, Pre-K:** Code LY basis of entry T on ELL Tab in FOCUS.

**ESOL USE ONLY**

**Foreign Exchange Student:** \_\_\_\_\_ If YES, do not test!

**English Language Learner (ELL):** Yes \_\_\_ No \_\_\_ **ELL Status:** LY \_\_\_ LF \_\_\_ TZ \_\_\_

**Basis of Entry:** A \_\_\_ R \_\_\_ L \_\_\_ T \_\_\_ **Basis of Exit:** H \_\_\_ I \_\_\_ J \_\_\_ L \_\_\_

Classification Date \_\_\_\_\_ Entry Date \_\_\_\_\_ Exit Date \_\_\_\_\_

Native Language \_\_\_\_\_ Tester \_\_\_\_\_

Comments \_\_\_\_\_

TEST NAME	TEST DATE	Title	Level (local) (Lvl) A-B-C-D	Rating (local) (RTG) BEG=1 LIN=2 HIN=3 PRF=4	Scale Score (SS)
Online CELLA (Form 3)		Listening/Speaking			
Other:		Reading			
		Writing			
		Comprehensive/ (Total)			



Vision:  
100% Student Success

Mission:  
"Educate and prepare each  
student for college, career  
and life."

ADMINISTRATION BUILDING  
301 Fourth St. SW  
P.O. Box 2542  
Largo, FL 33779-2942  
Ph. (727) 588-6000

SCHOOL BOARD OF  
PINELLAS COUNTY, FLORIDA  
Chairperson  
Linda S. Letter

Vice Chairperson  
Peggy L. O'Shea

Janet B. Clark  
Carol J. Cook  
Rene Flowers  
Terry Krastner  
Dr. Ken Paluso

Superintendent  
Michael A. Greco, Ed.D.

## REQUEST FOR RECORDS

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_

Authorized School Personnel: \_\_\_\_\_

### Please include:

Up-to-date transcript (including dates of entry/withdrawal, grading scale, all subjects and grades to date of withdrawal).

Discipline records

Any psychological/social work reports, IEP, or other pertinent data.

Health records (including birth certificate, physicals, & immunization records)

### Please send records to:

Largo High School  
410 Missouri Avenue  
Largo, Florida 33770  
Sr. DMT: Michelle Parcel  
[parcelm@pcsb.org](mailto:parcelm@pcsb.org)  
727-588-3758 ext. 2008  
727-588-4037 fax



# FLORIDA DEPARTMENT OF HEALTH SERVICES FOR THE PEOPLE OF PINELLAS COUNTY CENTER LOCATIONS

<b>Clearwater Center</b>	310 N. Myrtle Avenue Clearwater, Florida 727-469-5800
<b>Mid-County Center</b>	8751 Ulmerton Road Largo, Florida 727-524-4410
<b>Largo Center</b>	12420 130 <sup>th</sup> Avenue North Largo, Florida 727-588-4040
<b>Pinellas Park Center</b>	6350 76 <sup>th</sup> Avenue North Pinellas Park, Florida 727-547-7780
<b>St. Petersburg Center</b>	205 Dr. Martin Luther King, Jr. Street No. St. Petersburg, Florida 727-824-6900
<b>Tarpon Springs</b>	301 S. Disston Avenue Tarpon Springs, Florida 727-942-5457

FL-688 E/Ulmerton Road	3.6 miles, 11 minutes
------------------------	-----------------------

**Driving directions to the Florida Department of Health in Pinellas County  
~Mid-County Center~**

12420 130 <sup>th</sup> Ave Largo, FL 33774	
<b>1. Head north on 125<sup>th</sup> St/Jackson St toward 130<sup>th</sup> Ave N/Wilcox Road</b>	0.1 mi
<b>2. Take the 1st right onto 130<sup>th</sup> Ave N/Wilcox Road</b>	0.1 mi
<b>3. Turn left onto FL-688 E/Ulmerton Road</b>	3.2 mi
<b>4. Make a U-turn at Tall Pines Drive</b> Destination will be on the right next to to Taco Bell	0.1 mi
Mid-County Center 8751 Ulmerton Rd Largo, FL 33771	