

Mayfield Woods Middle School

New Student Orientation

For 6th grade and newly enrolled students and their parents

Come meet the staff and learn more about:

- *Your schedule and where your classes are*
 - *Academic & Related Arts Classes*
- *The Mayfield Woods Schedule & Special Programs*
 - *Tips for a Successful Mayfield Experience*
 - *Tips to Keep Communication Open*



Thursday, August 25th, 2016

1:00 – 2:00 P.M.

Parents in the Cafeteria

Students in the Gym

Student Name: _____

PARENT/GUARDIAN INFORMATION
PLEASE PRINT CLEARLY

Parent/Guardian #1:

Name: _____

Relationship to Child: _____

Address (if different than child):

Email: _____

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____ Name of Employer: _____

Interpreter Needed? Yes No If yes, what language: _____

Parent/Guardian #2:

Name: _____

Relationship to Child: _____

Address (if different than child):

Email: _____

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____ Name of Employer: _____

Interpreter Needed? Yes No If yes, what language: _____



Address/Phone Number Change Form

HCPSS Policy 9000 Student Residency, Eligibility, Enrollment and Assignment states that you must provide:

1. A deed or deed of trust that has all required signatures or an original lease with all required signatures.
2. A current bill for cable television, non-cellular telephone, or gas and electric.

This documentation must be provided by the parent/guardian to each school that siblings/HCPSS students attend.

Proof of Residence (for office use only)

- Deed Lease Utility Bill
 Multiple Family Multiple Family Proof 1 Multiple Family Proof 2

Student name _____ Current grade _____

Student ID# _____ Date of birth ____/____/____

Previous Address _____ New Address _____

Student lives with: Both Parents Mother Father Guardian Caretaker Foster Parent(s)

Parent/Guardian new phone numbers: Home _____ Cell _____ Work _____

Email address _____

Please list siblings/HCPSS students living at this new address:

Student name _____ Date of birth ____/____/____

Relationship _____ School name _____

Student name _____ Date of birth ____/____/____

Relationship _____ School name _____

Student name _____ Date of birth ____/____/____

Relationship _____ School name _____

Parent/Guardian signature _____ Date ____/____/____



HOWARD COUNTY
PUBLIC SCHOOL SYSTEM

REQUEST FOR STUDENT RECORDS

Student's Name: _____ Date of Birth: ____/____/____

Last School Attended: _____ Grade: _____

Address of Last School Attended: _____

Phone: _____ Fax: _____

_____ has enrolled in Mayfield Woods Middle School effective
_____. I hereby give permission for the release of all my child's records to the above
named school.

Parent/Guardian Signature _____ / ____/____
Date

Please forward education, health, special education, disciplinary, and confidential records to:

Student Services/Records Department
Mayfield Woods Middle School
7950 Red Barn Way
Elkridge, MD 21075
Phone: (410) 313-5025 Fax: (410) 313-5065

Thank you for your cooperation.

Signature _____ / ____/____
Date

**This form must be mailed or faxed within 2 days of student registration.
A second request must be mailed or faxed after 10 days.**

For Office Use Only:		
Date Request Sent/Faxed: ____/____/____	Second Request: ____/____/____	Date Records Received: ____/____/____

**Mayfield Woods Middle School
New Student Questionnaire**

Student Name _____

Grade _____

1. What is the name of the most recent math course your child completed (or is currently taking)?

2. Is your child currently enrolled in a World Language course? Please indicate French or Spanish.

3. Was your child on an active IEP (Individualized Education Plan) at his/her previous school? If yes, what is the category he/she qualifies for special education services? (Ex. Specific Learning Disability, Other health impairment, Speech/Language, etc.)

4. Was your child on a 504 plan at his/her previous school? If yes, indicate your child's physical or mental impairment used for qualification.

5. Did your child learn another language prior to speaking English? Does your child receive ELL (English Language Learner) or ESOL (English for Speakers of Other Languages) services?

6. If you feel that your child is performing two or more grades above grade level, would you like your child screened for participation in the Howard County G/T program? Please check the subjects that apply.

_____ English/Language Arts (ELA)

_____ Science

_____ Social Studies

_____ Math*

_____ My child was participating in G/T courses in Howard County. See transfer packet.

*Math placement is also contingent on the math course in which your child was last enrolled.

7. Does your child want to participate in one of the following music programs?

_____ Band instrument _____ years played _____

_____ Orchestra instrument _____ years played _____

_____ Chorus

8. Was your child receiving any school counseling services, special assistance, or tutoring? Please describe.



9. Please describe your child's interests and talents.

10. How does your child feel about school?

11. Please describe any concerns you have for your child regarding starting in a new school or any additional information you would like to share.



MAYFIELD WOODS MIDDLE SCHOOL STUDENT SUPPLIES, 2016-2017



The items below are maximum quantities needed and are merely a guide. Due to the nature of the middle school schedule, teachers may request fewer quantities than those listed below. We suggest you keep all receipts and original packaging in case items need to be returned.

ITEM	GRADE 6	GRADE 7	GRADE 8
1" BINDERS	9	9	2
3-RING BINDER	1	1	1
LOOSE LEAF PAPER	constant supply	constant supply	constant supply
DIVIDERS	(4) 8-pk	(4) 8-pk	(4) 8-pk
1-SUBJECT SPIRAL NOTEBOOK	7	7	4
5-SUBJECT SPIRAL NOTEBOOK	1 <i>(for Related Arts classes)</i>	1 <i>(for Related Arts classes)</i>	1 <i>(for Related Arts classes)</i>
MARBLE COMPOSITION BOOKS	4	4	3
POCKET FOLDERS	9	9	5
BLACK OR BLUE PENS	constant supply	constant supply	constant supply
#2 PENCILS	constant supply	constant supply	constant supply
RED PEN	1 per quarter	1 per quarter	1 per quarter
HIGHLIGHTERS	4	4	4
ZIPPERED PENCIL POUCH	1	1	1
GLUE STICK	constant supply	constant supply	constant supply
RULER	1	1	1
PROTRACTOR	1	1	0
COMPASS	1	1	0
SCISSORS	1	1	1
SET OF COLORED PENCILS	1	1	1
3 X 5 INDEX CARDS – 100/PK	3 packs	3 packs	3 packs
3 X 3 STICKY NOTES – 100/PK	1 pack	1 pack	1 pack
PAPER REINFORCEMENTS	1 pack	1 pack	1 pack
1 USB FLASH DRIVE (FILE STORAGE)	1	1	1
TISSUES (NOT REQUIRED BUT A REQUESTED DONATION ©)	Requested Donation	Requested Donation	Requested Donation

Student Planners will be provided to each student, free of charge.

Throughout the year, your child's teacher(s) may identify items for donation that they may need for their classrooms. If you would like to donate such items, it is certainly appreciated. Thank you.

The TI-84 Plus Graphing Calculator will be used regularly in your child's *algebra* and *geometry* class. If you choose to purchase a TI-84 Graphing Calculator for your student, we request that you keep it at home. We will have calculators available for students to use during the school day. We also have websites available for students to access a free graphing calculator. Teachers will make this information available to the students at the beginning of the year.

A standard scientific calculator will be used regularly in all other math classes, and will be available for children to use in school. If you wish to purchase a calculator for your child, we suggest that you wait until your child meets his/her teacher or until more information is sent home once school begins.