



Florida School Music Association Registration Form for PEP Student

Revised 07/24
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The student and parent/guardian must complete, sign in the presence of notary public and submit this form to the school at which the student wishes to participate **prior to participation** in the music activity in which the student wishes to participate and needs to be submitted one time per school year.

SECTION A:

- Name of student _____ Birth Date {mm/dd/yy} ____/____/____ Grade in school ____th
Home address _____ Home phone number (____) _____
- Student wishes to participate in interscholastic music at {name of school} _____
This is the public school the student is zoned to attend [Yes][No] This school a private school [Yes][No]
Student wishes to participate in the following music program(s) at this school _____
(list all)
- Student was enrolled in the ____th grade during the previous school year
- Student first entered the 9th grade on, if applicable {mm/dd/yy} ____/____/____
- This student has maintained a cumulative GPA of 2.0 or above on a 4.0 unweighted scale since entering 9th grade **OR**
the previous semester for (for grade 6 – 8) [Yes][No]

Transcript or Record of Grades Must be Attached. Transcripts or records must include all schools attended whether public, private, online, home education or other. Grades must be calculated using the “alpha” system (A, B, C, D and F). In determining the cumulative grade point average (GPA) for purposes of academic eligibility for interscholastic music activities, the following grading scale as mandated by § 1003.437, F.S., must be used: grade “A” is 90 to 100 percent and has a GPA value of 4; grade “B” is 80 to 89 percent and has a GPA value of 3; grade “C” is 70 to 79 percent and has a GPA value of 2; grade “D” is 60 to 69 percent and has a GPA value of 1; and grade “F” is 0 to 59 percent and has a GPA value of 0. If the student has not yet entered the 9th grade, attach a copy of the previous semester transcript or record of grades.

- Requirements for a PEP student:
 - Must be registered with the Florida Department of Education (FLDOE) approved scholarship-funding organization (SFO).
 - Must not be enrolled full-time in a public school, charter school, school for the deaf and blind, college preparatory academy, developmental research school, or juvenile justice school.
 - Must annually submit a Student Learning Plan (SLP) to the SFO.
 - Must take an FLDOE approved national norm-reference test and submit results to the SFO.
 - Must complete a sworn statement through the SFO.

Proof of Enrollment in Personalized Education Program (PEP) Must be Attached. The student or parent/guardian must provide the school with official documentation verifying enrollment in the Personalized Education Program (PEP).

SECTION B:

The above student is enrolled in the following courses for the [____] first semester of the current school year (**for fall MPA**) **OR**
for the [____] second semester of the current school year (**for spring or summer MPA or honors ensembles**):

Subject (list each)	Location where each course is taken
1. _____ [<input type="checkbox"/>] solely by parent [<input type="checkbox"/>] public or private school _____ [<input type="checkbox"/>] FLVS or Dist. Virtual School [<input type="checkbox"/>] dual enrollment _____ [<input type="checkbox"/>] other _____ <small>(identify college/university)</small> <small>(identify school)</small> <small>(identify)</small>	
2. _____ [<input type="checkbox"/>] solely by parent [<input type="checkbox"/>] public or private school _____ [<input type="checkbox"/>] FLVS or Dist. Virtual School [<input type="checkbox"/>] dual enrollment _____ [<input type="checkbox"/>] other _____ <small>(identify college/university)</small> <small>(identify school)</small> <small>(identify)</small>	
3. _____ [<input type="checkbox"/>] solely by parent [<input type="checkbox"/>] public or private school _____ [<input type="checkbox"/>] FLVS or Dist. Virtual School [<input type="checkbox"/>] dual enrollment _____ [<input type="checkbox"/>] other _____ <small>(identify college/university)</small> <small>(identify school)</small> <small>(identify)</small>	



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4. _____ [] solely by parent [] public or private school _____
(identify school)
 [] FLVS or Dist. Virtual School [] dual enrollment _____ [] other _____
(identify college/university) (identify)
5. _____ [] solely by parent [] public or private school _____
(identify school)
 [] FLVS or Dist. Virtual School [] dual enrollment _____ [] other _____
(identify college/university) (identify)
6. _____ [] solely by parent [] public or private school _____
(identify school)
 [] FLVS or Dist. Virtual School [] dual enrollment _____ [] other _____
(identify college/university) (identify)
7. _____ [] solely by parent [] public or private school _____
(identify school)
 [] FLVS or Dist. Virtual School [] dual enrollment _____ [] other _____
(identify college/university) (identify)
8. _____ [] solely by parent [] public or private school _____
(identify school)
 [] FLVS or Dist. Virtual School [] dual enrollment _____ [] other _____
(identify college/university) (identify)

Section C:

I/we understand that through this document that I/we are registering our intent to participate in interscholastic music activities on listed above for this member school of the Florida School Music Association (FSMA). I/we, therefore, agree that this student will be subject to and abide by all FSMA rules, as well as the regulations of the school, pertaining to interscholastic music participation. **I understand that I am swearing or affirming under oath to the truthfulness of the information provided and statements made on this form and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

_____ / _____ Signature of Student Date	STATE OF FLORIDA, COUNTY OF _____ Sworn to or affirmed before me on {date} _____. [Notary Seal:]
_____ Printed Name of Student	_____ Signature of Notary
_____ / _____ Signature of Parent/Legal Guardian Date	_____ Printed Name of Notary
_____ Printed Name of Parent/Legal Guardian	NOTARY PUBLIC My commission expires: _____, 20____.
	Personally known to me _____ OR Produced Identification _____ Type of Identification Produced _____

Signatures of student and parent/legal guardian must be notarized.