LAGRANGE MIDDLE SCHOOL and UNION VALE MIDDLE SCHOOL
GUIDANCE DEPARTMENT

7th Grade

LAST NAME:________________________________________________________________________________
FIRST NAME:______________________________________ MIDDLE:_________________________________

In the Arlington District, Level 1 of foreign language is delivered over 2 years. Therefore, all 7th and 8th grade students (with the very limited exception of some in special education programs) are to be enrolled in foreign language. Once your child chooses a language he/she will not be allowed to change according to the New York State Education Department. They will be scheduled in this course for 2 years.

Students entering the 7th grade are required to take the following courses: English, Social Studies, Life Science, Mathematics, Art, Foreign Language, Physical Education, Home & Careers, Technology and Music. The educational needs of students with academic intervention classes or special education plans take priority. Some electives may not fit into their schedules.

**FOREIGN LANGUAGE IS A TWO YEAR COMMITMENT**
NO EXCEPTIONS

Please indicate your Foreign Language Choice (Example 1,2,3).

<table>
<thead>
<tr>
<th>__________ FRENCH</th>
<th>__________ ITALIAN</th>
<th>__________ SPANISH</th>
</tr>
</thead>
</table>

*Every effort will be made to honor your 1st choice, but students are placed on a 1st come, 1st served basis. We cannot guarantee it.|

Please indicate below if you are now in one of the following performing music groups and wish to continue. All who are not in a performing music will be assigned General Music.

<table>
<thead>
<tr>
<th>__________ CHORUS</th>
<th>__________ ORCHESTRA</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________ BAND</td>
<td>__________ GENERAL MUSIC</td>
</tr>
</tbody>
</table>

PERMANENT RECORD INFORMATION – PLEASE DO NOT DETACH

PARENT/GUARDIAN 1: _____________________________________ PARENT/GUARDIAN 1 CELL #:_________________
EMPLOYER:__________________________________________ EMPLOYER WORK #:_____________________________
PARENT/GUARDIAN 2: _____________________________________ PARENT/GUARDIAN 2 CELL #:_________________
EMPLOYER: _________________________________________ EMPLOYER WORK#: _____________________________
NAME OF PARENT/GUARDIAN CHILD LIVES WITH________________________________________________________
RELATIONSHIP TO CHILD______________________________________________________________________________
PUPIL’S ADDRESS: ____________________________________________________________________________________
CITY/TOWN_____________________________ZIP CODE___________________HOME PHONE#____________________
MOTHER’S EMAIL: _______________________________  FATHER’S EMAIL: ___________________________________
PUPIL’S MAILING ADDRESS (IF DIFFERENT): PO BOX____________________________________________________
CITY/TOWN_________________________________________________ZIP CODE______________________________

PARENT/GUARDIAN SIGNATURE_________________________________________DATE_______________________