

# North Carolina Migrant Education Program (NCMEP)

## Priority for Services (PFS) Worksheet



The Priority for Services (PFS) Worksheet assists local Migrant Education Programs (MEP) in determining migratory children and youth that meet the PFS criteria and should receive MEP services first. Completed worksheets and supporting documentation for each child and youth identified as PFS should be kept on file in a central location designated by the local MEP director. Achievement data used in making the PFS determination must be less than one year old.

### **Part I: Student Information**

Student's Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Qualifying Arrival Date (QAD): \_\_\_\_\_

MSIX ID: \_\_\_\_\_ PS UID: \_\_\_\_\_

District: \_\_\_\_\_ Grade Enrolled: \_\_\_\_\_

### **Part II: PFS Eligibility**

#### **Criterion #1: Child Mobility [1304(d)]**

☐ Child's Qualifying Move (QM) within the previous 1-year period

Move From and Move To (City, State)	Date of Child's QM

#### **Criterion #2: Academic Risk [1304(d)(1)] (Select *only one*: 2a, 2b, or 2c)**

☐ **Criteria 2a:** Student has NC Assessment Scores (EOG, EOC, and/or W-APT/ACCESS Scores) within one year of qualifying move.

Subject Area Assessment	Date (mm/yy)	Scores(s)

☐ **Criteria 2b:** Student does not have NC Assessment Scores (Select one risk factor)

☐ Retained at least once during K-12 educational career

☐ Grade/Age Compatible

☐ Credit Deficiency/Not on-track to graduate

☐ Attendance

☐ Receiving Exceptional Children's Services (EC)

☐ Homeless

☐ Non- NC State Assessment Scores

☐ Other risk factor not listed: \_\_\_\_\_

If other is check, please contact a MEP Administrator to confirm other risk factor

Date communicated with MEP Administrator to confirm other: \_\_\_\_\_

☐ **Criteria 2c:** Student dropped out of school during or after 9<sup>th</sup> grade

Note the dropout date \_\_\_\_\_ (mm/yyyy)

Grade level at time of dropout \_\_\_\_\_

**Part III: PFS Services**

Below, please indicate which services the student will be receiving both from the MEP and from other district and local programs/organizations. If you need additional space to describe services, please use an additional page.

**Title I, Part C (MEP) Services**

☐ Reading Instructional Services

☐ Math Instructional Services

☐ Other Instructional Services: \_\_\_\_\_

☐ Credit Accrual Services

☐ Mentoring

☐ HSED/GED/HEP Assistance

☐ Referred Service(s): \_\_\_\_\_

☐ Supportive Services: \_\_\_\_\_

**Other District Services**

☐ Title I, Part A: \_\_\_\_\_

☐ Title III: \_\_\_\_\_

☐ Title III, Immigrant: \_\_\_\_\_

☐ McKinney-Vento (Homeless)

☐ Food and Nutrition Services

☐ MTSS: \_\_\_\_\_

☐ Other: \_\_\_\_\_

PFS Worksheet Prepared By: \_\_\_\_\_ Date: \_\_\_\_\_

Date of PFS Designation on Supplemental Service Report (SSR): \_\_\_\_\_

Date of Principal and Teacher Notification: \_\_\_\_\_

MEP Director/Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date PFS Status Reported in New Program Year: \_\_\_\_\_