**Important Dates**

Feb. 7 PVMS Talent Show 7:00 p.m. ~ Cafeteria

Feb. 13 Music Booster/PTA Meeting 6:00/7:00 p.m. ~ Cafeteria

Feb. 17 Presidents’ Day ~ Schools & offices closed

Feb. 25 7th Grade to visit Holocaust Museum 9:00 a.m. ~ WDC

Mar. 3 HCPSS Band Assessment TBD ~ MHHS

Mar. 5 HCPSS Band Adjudication TBD ~ MHHS

Mar. 6 Snow date for PVMS Talent Show 7:00 p.m. ~ Cafeteria

Mar. 13 Middle School County Debate 9:00 a.m. ~ APL

April 1 6th Grade Performing Arts Field Trip 9:00 a.m. ~ Balt. Symphony

April 6-13 Spring Break ~ Schools closed

April 17 8th Grade to Days End Farm Horse Rescue 9:00 ~ Days End

April 21 Report Cards issued

April 22-23 Movies that Matter Film Festival 8:00 a.m. ~ A.F.I. Theater,

 Silver Spring, MD

April 28 Primary Election Day ~ School/Offices closed

April 29 Music Dept. Field Trip to New York City 6:00 a.m. ~ NYC

April 30 International Night 6:30 p.m. ~ Cafeteria

**\*\*\***NEW ADDITIONS TO THE CALENDAR

**NEW INFORMATION FROM PVMS**

**2/7/2020**

**News from Lifetouch Sutterfly:**

[**..\..\Shutterfly Storefront Set up QRG 4-15-19-1.pdf**](../../Shutterfly%20Storefront%20Set%20up%20QRG%204-15-19-1.pdf)

**BELOW IS INFORMATION FROM PREVIOUS GAZETTES**

**SCHOOLHOUSE THEATER**

Schoolhouse Theater is coming to PVMS and they are looking for interested students to be in the musical Aladdin.  For grades 6-8, with rehearsals on Monday's from 6-8:30pm staring February 3 with the final show on April 1st & 2nd.

The cost is $175.   $30 discount offered to the first 25 registrants.     Turn in the form with payment to your student's homeroom teacher or drop off at the front office in an envelope labeled schoolhouse theater.   Make check payable to Schoolhouse Theater.

Form and payment are the only ways to guarantee a discounted spot.

See our website (http://pvmspta.weebly.com/school-house-theater.html) or the flyer for more details.   Email Archana Neidermeyer for any addition questions at archneid@gmail.com

**PVMS has a School Based Wellness Center!**

Be sure to complete the forms for your child - forms available in the health room or on the PVMS website at this link: [http://pvms.hcpss.org/sites/default/files/English-%20School-Based%20Wellness%20Center%20Enrollment%20Packet\_0.pdf](https://nam01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fpvms.hcpss.org%2Fsites%2Fdefault%2Ffiles%2FEnglish-%2520School-Based%2520Wellness%2520Center%2520Enrollment%2520Packet_0.pdf&data=02%7C01%7CColby_Andersen%40hcpss.org%7Ca9e0238d5ad34b0917ae08d76c3e7fa4%7C96a9ac4c477e4dada2b28ad3fc46790b%7C1%7C0%7C637096887989314939&sdata=ljr8SNmKBC9%2B3fBg5FBR00zmkc46Anu08puL6rpz%2BRg%3D&reserved=0)

School-based wellness centers help students stay in school or get back to school quicker. This service also helps parents miss less days at work. There is NO copay or fees for visits to the Wellness Center. The nurse practitioner provides assessment, diagnosis and treatment of acute illnesses such as strep throat, impetigo and ear infections. Some students can also be seen at the Wellness Center for physicals, medication orders, immunizations, health education and sports physicals. Parents communicate by phone or can come to the wellness center for the visit. **This health care option is available for all students at PVMS and BBES. Complete and return the forms today!**

**PTA NEWS**

Keep those membership forms and donations coming in! You can send them in with your student.  Forms can be found on our website.

Also keep filling out the survey to let us know what you would like us to do for you. https://www.surveymonkey.com/r/X5SZLFZ

To keep up to date with PTA news please visit our website often at www.pvmspta.weebly.com

Also follow us on Facebook at www.facebook.com/pvmspta

Or contact us with any questions at pvmsptamd@gmail.com

Thank you!

**Family File Emergency Information**

Dear PVMS Parents/Guardians,

Every year, HCPSS requires that all parents/guardians complete the Family File Emergency Information for each student. Without this updated information, your student risks the possibility of not being able to attend field trips or participate in after school activities.  Safety is a primary consideration for all of our students, and updated Emergency Contact Information plays an important part.

Go to [www.hcpss.org](https://urldefense.proofpoint.com/v2/url?u=http-3A__www.hcpss.org&d=DwMFAw&c=fgAH0TEak9hSJygxoVsafg&r=Y9l4dDBsZ0lFwoSUpnSfARcgeXKLikSJpuNaQdYvF7E&m=zEWNtBWP50WS5Fitn5kQyueh-d-5Dzv-ItaNrjmVjto&s=p8EukTnkSIdZLvRyirrAyrli69L6AszBnx75Wgwt36Q&e=) select HCPSS CONNECT, select HCPSS Connect Login, type your user name (parent email) and password.  Once logged in go to the Family File tab and follow the steps

to verify and/or update.  Forgot password?  See information link located on HCPSS Connect

Login page.   **PLEASE UPDATE FAMILY FILE INFORMATION AS SOON AS POSSIBLE**

Contact Mrs. Minnick or Mrs. Andersen with any questions or concerns at 410-880-5840.

**School Messenger Text Alerts**

Due to the number of late buses and bus changes this year, it has been requested that we send out directions on how parents/guardians can sign up their student to receive text alerts via School Messenger.  The directions are included below.

Step 1:  go to [https://www.hcpss.org/hcpss](http://track.spe.schoolmessenger.com/f/a/YY-z9dD-z7gQ0kEg8zhsXA~~/AAAAAQA~/RgRdpgXaP0QbaHR0cHM6Ly93d3cuaGNwc3Mub3JnL2hjcHNzVwdzY2hvb2xtQgoAAFrSxFsSH-2gUhhDb2xieV9BbmRlcnNlbkBoY3Bzcy5vcmdYBAAAAAE~)

Step 2:  go to [Sign-up (Non-HCPSS Parents/Guardians)](http://track.spe.schoolmessenger.com/f/a/IKD93d-oVbgJ9CQIhM60XQ~~/AAAAAQA~/RgRdpgXaP0QmaHR0cHM6Ly9zdWJzY3JpcHRpb25zLmhvY29zY2hvb2xzLm9yZy9XB3NjaG9vbG1CCgAAWtLEWxIf7aBSGENvbGJ5X0FuZGVyc2VuQGhjcHNzLm9yZ1gEAAAAAQ~~)

Step 3:  Complete Subscriber Information

Step 4:  Using your cell phone text the word YES to the number 67587 to activate your subscription after signing up.  Students will automatically receive HoCo Weather Alert.

Note:  You may deactivate your subscription by texting the work STOP to the number 67587.

**FREE EYE EXAMS AND GLASSES to HCPSS students that need them**

"We have an exciting clinic which will take place at Howard High School​ coming up at the end of February and the beginning of March that will provide FREE EYE EXAMS AND GLASSES to HCPSS students that need them.  There is an extensive email below with all the details.  Please feel free to pass this information along to families or students that might need this free service especially those students that might not have vision insurance.  The attachments are also helpful in passing along information.  The WORD document needs to be filled out in order to make the appointment.  The COMPLETED forms can be brought to the health room and it will get passed along to health services."

**Eye Exam Reservation Form**

Free services and glasses will be provided regardless of insurance or citizen status. Please complete form to obtain service. All information provided will remain confidential and will only be used for the SOLE purpose of services delivered as part of the Beyond 2020 outreach program.

**Student Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Last, First)

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Last, First)

Phone: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (optional):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred Eye Exam Times (date and time)**

Saturday Feb 29 **AM** 8:30 9:30 10:30 **PM** 12:30 1:30 2:30

Sunday March 1 **AM** 8:30 9:30 10:30 **PM** 12:30 1:30 2:30

1st Choice: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2nd Choice: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3rd Choice: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Background Information**

Does your child wear glasses? **Yes or No**

If yes, please bring most current pair of glasses and/or prescription

Has your child experienced any reading difficulties? **Yes or No**

Within the last twelve months, has your child received a comprehensive eye exam from an eye doctor
(optometrist or ophthalmologist)? **Yes or No**

Do you require an interpreter? **Yes or No**

If yes, which language? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you require transportation assistance? **Yes or No**