



Barnaamijka ActivePass Foomka Isdiwaangalinta

Fadlan u daabac si habaysan. Buuxi foomkan gabi ahaantiis kuna soo celi xarunta raaxada.

#1 Waalidka/Masuulka Magacisa Hore _____ Magaca Dambe _____ Taariikhda Dhalashada _____

Jinsiyada: Dhedig Lab (iqitayaar)

Ciwaanka _____ Magaalada _____ Gobolka _____ Lambarka Koodhka _____

Telefoonka Guriga (____) _____ Telefoonka Gacanta(____) _____ IImaylka _____

#2 Waalidka/Masuulka Magacisa Hore _____ Magaca Dambe _____ Taariikhda Dhalashada _____

Jinsiyada: Dhedig Lab (iqitayaar)

Cinwaanka _____ Magaalada _____ Gobolka _____ Lambarka Koodhka _____

Telefoonka Guriga (____) _____ Telefoonka Gacanta(____) _____ IImaylka _____

#1 Magaca Hore ee ilmaha _____ Magaca Dambe _____ Taariikhda Dhalashada _____

Jinsiyada: Dhedig Lab (iqitayaar)

#2 Magaca Hore ee ilmaha _____ Magaca Dambe _____ Taariikhda Dhalashada _____

Jinsiyada: Dhedig Lab (iqitayaar)

Ilmaha wuxuu la degenyahay Hooyo Aabe Eedo/Habaryar Abti/Adeer Awoowe/Ayeeyo Cidkale _____

Calaamadi halkan hadii Cinwaanka gurigu uu isku mid yahay kan ilmaha. Hadii aanu ahayn ku qor hoos.

Cinwaanka _____ Magaalada _____ Gobolka _____ Lambarka Koodhka _____

Telefoonka Guriga(____) _____ Telefoonka Gacanta(____) _____ IImaylka _____

Fadlan hoos ku qof hadii ay jiraan xaalado caafimaad, hoy khaas ah ama xasaasiyad.

Magaca qofka lagala xiriira xaalada degdega ah: _____ Xiriirka _____ Telefoonka _____

SHARCIGA XOG ISTICMAALKA/DIGNIINTA TENNESSEN EE ISTIMAALKA XOGTA DAWLADA EE MINNESOTA

Magacaaga, cinwaankaaga, telefoonkaaga, iyo dhamaan warbixin kasta oo ku astaynaysa oo kuu gaar lamana siin karo dadwaynaha. MPRB ayaa u baahan warbixintan si ay ugu isticmaasho ka qaybgalka barnaamijka raaxada iyo in lagula soo xidhiidho. Hadii ay lagama maarman noqoto, hadii aanad siin warbixinta, qofka ka qaybgalaya kama qaybgalayo barnaamijka uu codsado. Warbixintan waxaa la la wadaagayaa kaliya dadka loo ogolaado inay arkaan iyagoo ku shaqaynaya sharciyada heer gobol iyo mid federal ah, dadka ay maxkamadi u ogolaato inay helikaraan warbixintan, dadka aad si qoraal ah ugu ogolaatay inay heli karaan warbixintan iyo dhamaan dadka shaqaalaha ah ama haayadaha si khaas ah ula shaqeeya MPRB kuwaas oo u baahan warbixintan si ay u maamulaan barnaamikan.

WARGALINTA BARNAAMIJKA IYO TIXRAACA

Barnaamijka ActivePass waa kala duwanyahay sida mudada, qaabka, da'da ka qaybgalayaasha iyo heerka kormeerka. **KA QAYB GALKU ACTIVE-PASS WAXAAD QIRAYSAA IN DHAMAAN BARNAAJIYADA ACTIVEPASS AANAY BIXIN KORMEERE.** Dhamaan ka qaybgalayaasha iyo waalidku waa inay adeecaan tixraaca ilaalinta caruurta ee Koontiga Hennepin. Wixii warbixin dheeraada oo ku saabsan barnaamijka ActivePass iyo barnaamiyada leh kormeerayaasha fadlan la xidhiidh xarunta raaxada si toos ah.

Waalidka/Ilaaliyaha Saxeexa _____ Taariikhda _____

OFFICE USE ONLY

New Card

Replacement Card

Date _____ Date entered into Database _____ Amount Paid \$ _____ Form of Identification _____

Date/Name of Verbal Acknowledgement of Tennessee Warning (if applicable) _____

Staff Name _____

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