

Student Information

Last Name		First Name		Middle Name		Sex		Date of Birth	/	/	
Social Security Number		Place of Birth									
City, State and Zipcode											
Address											
Phone Number		Medicaid Number		Email Address							
Student Lives with:	Both Parents	Father	Mother	Guardian	Stepmother	Stepfather					
Racial/Ethnic Origin:	White	Hispanic	Black	Asian	Other: _____						

Parent/Guardian Information

Name (First, Middle, Last)	Address	Phone Number		Place of Employment	Work Phone Number
Father:		H:	C:		
Mother:		H:	C:		
Maiden Name:					
Step Parent/Guardian:		H:	C:		

If parents are divorced/separated:

*Who has legal (court appointed) custody?			
*If joint custody, who has residential custody?			
*Is there a restraining order?	Yes	No	Against Whom?

School Alert System for Delays and Closures

_____ Phone Number

*A copy of these documents MUST be provided to the school.

List **TWO LOCAL** adults (other than parents/guardians) who will assume temporary care of your child in case of emergency or who they can be released to:

Name	Relationship	Address	Phone
Name	Relationship	Address	Phone

Siblings

Name	Age	Grade	School Attending

Your student may accompany their class on school organized field trips?	Yes	No
Student's picture and video may be used for educational, promotional, or other program purposes?	Yes	No
May participate in swim program?	Yes	No
Does your student know how to swim?	Yes	No
May be included in class roster (Name, parent(s) name, date of birth, and phone number)?	Yes	No

Signature of Parent/Guardian

Date

For Office Use Only

For Teacher Use Only

Sent to EMIS	Entry Date	Withdrawal Date	Date of Last MFE	School District of Residence
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