



NEW STUDENT INFORMATION SHEET

Legal Name _____ Nickname _____
Last First Middle

Male _____ Female _____ Entry Date ____/____/____ Entry Grade Level _____ Birthdate ____/____/____

Is this child a Ward of the Court? _____ If so, list Caseworker _____

Immunization Record Complete? _____ Incomplete? _____ Social Security # _____

Child resides with: Both Parents _____ Mother Only _____ Father Only _____ Other _____

Address _____ City _____ Phone _____ County _____

Email Address _____

Parent or Guardian	Name	Address	Occupation	Place of Employment	Work Hours	Work Phone
Father						
Mother						
Guardian						

Name of Children in Family	Birthdate	Relationship to Student

Would parents be interested in volunteering at school? (If yes, specify days & times.) _____

Does your child have allergies or illnesses we should be aware of? _____

Will your child need bus service? _____ If so, give directions to where you live: _____

If your child was enrolled in any of the following programs, please indicate with a "checkmark":

_____ Resource (Learning disabilities) _____ Remedial Reading _____ Remedial Math
_____ Gifted Education _____ Other (Specify): _____