Date of Enrollment _____

Student ID Number _____

New Student Information Sheet

Name _____ Sex_____ Age _____ Grade _____

Home Address _____

Home Phone # _____ Date of Birth _____

Social Security # _____-_____-_____

Student lives with (check one) ____ Both Parents ____ One Parent ____ Guardian_____
Relationship to you.

Parent/Guardian Names Employer Work Phone Cell Phone

_____

_____

Emergency Contact Name Relationship Home Phone Work Phone Cell Phone

_____

School District in which you currently live _____

Previous School Attended _____ Phone Number _____

Place of Birth _____

Ethnicity (Check one): _____ American Indian/ Alaskan Native _____Asian/ Pacific Islander

_____ Black, not Hispanic _____ Hispanic ____White, not Hispanic

Other information that you believe will assist us in serving your child:

_____

_____

_____

I certify that the above information is true and correct to the best of my knowledge.

_____ _____

Signature of Parent/Guardian Date