

Household Information-Secondary (Required in Shared Custody Situations)

Exact Physical Address (Not a PO Box)
Number, Street and Town

Mailing Address (If different)

Household Telephone Number _____

Members of Secondary Household –Please Include Siblings and Grade

Name	Relationship/Grade	Work Phone	Cell Phone	Email

Emergency Contact Information-local contact other than above when parents/guardians cannot be reached

Name	Relationship	Phone #1	Phone #2	Email

School Attendance History

Previous School Name: _____ Grade: _____

Address: _____

Has Your Child Ever Had A Special Program As Shown Below?

Special Education	Speech/Language	504	CDS
Guidance	Social Worker	Gifted & Talented	Title 1

Printed Name of Parent /Legal Guardian: _____

Signature of Parent/Legal Guardian (In Ink): _____

Dated: _____