☐ OK as is
☐ See marked corrections

_____
Parent Signature

2009-2010 STUDENT INFORMATION FORM

***Student Name:**
***Grade:**
***Birthday:**
Ethnicity:

***Primary Address:** **City:** **State:** **Zip:**
***Primary Phone:**

***Secondary Address:** **City:** **State:** **Zip:**
***Secondary Phone:**

***Parent Formal Salutation:**
Parent Informal Salutation:

***Mother:**
***Cell Phone:**
***E-mail:**
Occupation:
Employer:
Work Address:
Work Phone:

***Father:**
***Cell Phone:**
***E-mail:**
Occupation:
Employer:
Work Address:
Work Phone:

***Stepmother:**
***Cell Phone:**
***E-mail:**
Occupation:
Employer:
Work Address: ,
Work Phone:

***Stepfather:**
***Cell Phone:**
***E-mail:**
Occupation:
Employer:
Work Address:
Work Phone:

Maternal Grandparent Salutation:
Maternal Grandparent Address:
Maternal Grandparent City:
Maternal Grandparent State:
Maternal Grandparent Zip:

Paternal Grandparent Salutation:
Paternal Grandparent Address:
Paternal Grandparent City:
Paternal Grandparent State:
Paternal Grandparent Zip:

Information designated with an asterisk (*) will be published in the school directory unless otherwise specified here: _____

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