Student Information Sheet

Student Name:		Homeroom Teacher:	
Street Address:		Grade:	
City:		Home Phone Number:	

Guardian 1 Email Address		Student Email Address	
Guardian 2 Email Address		Is there a computer in the home?	☐ Yes ☐ No

Name(s) of Guardian(s):	Guardian 1	Guardian 2	
Guardian 1 Work Phone:		Guardian 2: Work Phone:	
Cell Phone:		Cell Phone:	
Emergency Contact:		Emergency Phone Number:	
Relationship:			
Persons authorized to pick up the student			

How do you get home? ☐ Bus # _____ ☐ Walk/Bicycle ☐ Car			
Birth Date:		Lunch Number:	

Schedule

Period	Class	Teacher	Room #