## Sycamore Elementary School-Vail School District No. 20

## 2010/2011 Student Information

Student Information						ustodial	Alert: y Guardia			s (		
Student lives with: ( ) Both	Parents ( ) N	Mother ( ) Fat	her ( ) Leg	gal Guar			iust prov		,		*	1.
Student's Last Name:Student's First Name:										M	[	
Grade Level:G	ender: ( )M (	)F DOB:			_Ethnicity: (	)W	( )H	( )	)B	( )A	<b>\</b> (	)I
Special Medical Considerations/	Allergies:											
Home Address:	-				City:			7	Zip:			
Mailing Address:												
(where all corresponden	ce will be sent)								·P·—			
Parent Information												
Parent's Marital Status: ( ) Mar	rried ( ) Sing	ele ( ) Divorc	ed ( ) Wi	idowed	( ) Separa	ted						
Mother's Name:					_Employer:_							
Mother's Contact Info: Ho	ome #:		Work #:				Cell #:					
Father's Name:					Employer:							
Step Mother's Name:												
Step Mother's Contact Info: Ho												
Step Father's Name:												
Step Father's Contact Info: Ho	ome #:		Work #:				Cell #:					
Legal Guardian's Name:					_Employer:_							
Legal Guardian's Contact Info: Ho	ome #:		Work #:				Cell #:					
Other Emergency Contact Info.	(Someone other	than listed above	<u>)</u>									
Name:												
Home #:		Wor										
Name:					ship to Stude							
Home #:		Wor	k #:				Cell #:					
Family Information												
Brothers		Date of Birth	:	<u>Sisters</u>						Date o	f Birth	<u>l</u>
		-	<del></del>					_				
		_										
Previous School Information												
Has your child ever previously a	ttended an Arizor	na school? ( ) Y	es ( ) No	)								
Last School Attended:					L	ast Da	te Attend	ed:		_MO		YR
Address, City & State:												
Has your child attended Kinderg					-							
Signature of Parent/Guardi	an:											
Office Use Only:		_										,
Entry Date:	Entry Code:	PowerS	School Area:		F	amily	Rep: (Ma	agic Co	unt):	( ) Y	es (	( ) N