

HARRISVILLE CENTRAL SCHOOL

2010-2011

STUDENT PERSONAL DATA UPDATE SHEET

Please return this form to your homeroom teacher or the main office as soon as possible. This information is required by the NYS Dept of Education to be on file for each student.

Note: Both sides of this form must be completed AND signed.

Name: _____ Sex: ___ Age: ___ DOB: _____

Home Phone: _____ Parent/Guardian Cell: _____ or _____

Ethnicity: (choose one): ♦Hispanic/Latino or Spanish origin ♦Not Hispanic/Latino

Race: (select one or more): ♦ White ♦American Indian or Alaska Native ♦Asian
♦ Black or African American ♦Native Hawaiian or Other Pacific Islander

Student is residing with: (List names) _____
(Circle Relationship) Mom Dad Both Parents Foster Parent Relative Caregiver Other _____

If child is not living with biological parents (mother & father), custody order or guardianship affidavit must be attached to registration form.

Mailing Address: _____

911 Address (if different than mailing address): _____

E-mail address: _____ Military: Yes/No Mom Dad Other

Guardian Information: If different than student's information above.

Legal Guardian(s) Name(s): _____ Guardian's Cell Phone(s): _____

Relationship to Child: _____ Address: _____

Emergency Contact Person & Phone #: _____

Duplicate Information to be sent to (name & address & relationship to child): _____

Employment Information:

Father/Guardian Place of Employment: _____ Work Ph.: _____

Mother/Guardian Place of Employment: _____ Work Ph.: _____

Other children living in the home: Name _____ Date of Birth _____
Name _____ Date of Birth _____
Name _____ Date of Birth _____

Check one box

I/we verify that I/we, am/are the: ___ natural, custodial parent ___ legal guardian
___ relative caregiver/other (must present complete, notarized form)

I/we verify that the student named resides with me/us and that our residence is within the Harrisville Central School District. I/we certify that all the information above & on the enrollment form is accurate & correct.

Parent/Guardian Signature _____

Date _____

Parent/Guardian Signature _____

Date _____

CHILD RELEASE FORM

On reverse side of this form MUST be completed.