

# Student Contact & Information

Students Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

House Phone Number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Best time to reach you? \_\_\_\_\_

Cellphone Number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Email address: \_\_\_\_\_

**\*\*Emails are important for teacher contact & class information\*\***

Do you have an active eSchool account? Yes or No

**\*\*Grades are posted via eSchool \*\***

## Miscellaneous

Please make note of any special needs concerning your child that might help us better serve you. (learning environment, strategies, allergies, academic/social concerns etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date