

# Student Information Card



Student no.

First name \_\_\_\_\_ Last name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother's name \_\_\_\_\_ Mother's phone \_\_\_\_\_

Father's name \_\_\_\_\_ Father's phone \_\_\_\_\_

Student's birthdate \_\_\_\_\_

Mother's email \_\_\_\_\_

Father's email \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Medical concerns: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Emergency contact \_\_\_\_\_

Emergency phone \_\_\_\_\_

Transportation to and from school: \_\_\_\_\_ walks \_\_\_\_\_ rides bus (#\_\_\_\_\_) \_\_\_\_\_ other

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Father's name \_\_\_\_\_ Father's phone \_\_\_\_\_

Student's birthdate \_\_\_\_\_

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Comments: \_\_\_\_\_  
 \_\_\_\_\_  
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Medical concerns: \_\_\_\_\_  
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