

Camden School System Student Information Form

Date _____

Homeroom/Teacher - _____ Grade _____

STUDENT

Pupil No. _____

Legal Last Name _____

Legal First Name _____

Preferred First Name _____

Middle Name _____ Gender: M F

Birth Date _____

Proof of Age _____

Home Phone _____ Unlisted: Y N

Are you Hispanic or Latino? Yes No

PROPERTY ADDRESS

Street _____

Apt # _____

City _____ State _____ Zip _____

MAILING ADDRESS

Street _____

Apt # _____

City _____ State _____ Zip _____

Vehicle Make/Model _____

Vehicle License Number: _____

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American
<input type="checkbox"/> Native Hawaiian/Other Pacific Islander	<input type="checkbox"/> White	<input type="checkbox"/> Two or more

Social Security No. _____

ADMISSION/TRANSFER INFORMATION

Admission Date _____ Grade _____

Previous School/District _____ Address _____

Previous School/District _____ Address _____

PARENT/GUARDIAN INFORMATION

(Documentation of legal custody must be provided if natural parents reside at different addresses.)

Custody _____ Living With _____ Court Access _____

1. Relationship _____

Last Name _____

First Name _____

Living w/ Student: Yes No

Same as Student Address: Yes No

Address _____

Language _____ Speaks English: Y N

Place of Employment _____

Occupation _____

Business Phone _____

Home Phone _____

Cell Phone/Other _____

E-Mail Address _____

Education Level _____

2. Relationship _____

Last Name _____

First Name _____

Living w/ Student: Yes No

Same as Student Address: Yes No

Address _____

Language _____ Speaks English: Y N

Place of Employment _____

Occupation _____

Business Phone _____

Home Phone _____

Cell Phone/Other _____

E-Mail Address _____

Education Level _____

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EMERGENCY CONTACTS (Attach sheet with additional emergency contacts if desired.)

1. Last Name _____
First Name _____
Relationship _____
Language _____
Address _____

Place of Employment _____
Can pick up student: Yes No
Home Phone _____ Unlisted: Y N
Work Phone _____
Cell Phone/Other _____

2. Last Name _____
First Name _____
Relationship _____
Language _____
Address _____

Place of Employment _____
Can pick up student: Yes No
Home Phone _____ Unlisted: Y N
Work Phone _____
Cell Phone/Other _____

STUDENT SIBLINGS

Name _____	Name _____	Name _____	Name _____
Relationship _____	Relationship _____	Relationship _____	Relationship _____
Age _____ Grade _____	Age _____ Grade _____	Age _____ Grade _____	Age _____ Grade _____
School _____	School _____	School _____	School _____

Parent Signature _____ Administrator Signature _____
Date of Signature: _____ Date of Signature: _____