

Student Information Form

GENERAL STUDENT INFORMATION

Student Name:	DOB:
Grade:	
Home address:	
Student T-Shirt Size: YS YM YL AS AM AL AXL	

PARENT CONTACT INFORMATION

Parent/Guardian 1:	Parent/Guardian 2:
Name: (First, Last)	Name: (First, Last)
Please circle: Mom Dad Other: _____	Please circle: Mom Dad Other: _____
Cell Phone:	Cell Phone:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
E-mail:	E-mail:

MEDICAL INFORMATION

Does your child have any allergies that you are aware of? If so, please indicate.

Is there any other medical information that I need to be aware of?

FAITH INFORMATION

Is your family active in a church home? Yes _____ NO _____ Which church? _____

What faith education does the student receive? Home _____ Sunday School _____ VBS _____ Elevate only _____ Family _____ Other _____

My favorite way to learn is : Reading _____ Tactile/doing _____ Listening _____ social _____

Logical _____ Musical _____ Other _____

HOME INFORMATION

Student lives with (please circle) Both Parents One Parent

Other: _____

Is there any custody information I should be aware of?

SIBLINGS

Name:

Age:

Grade:

Is this your child's first year at Elevate?

If no, how long have they attended?

Does your child participate in any extracurricular activities? If so, how many days per week?

Is your child able to use a computer with internet at home?

Is your child able to print at home?

VOLUNTEER INFORMATION

Please circle any areas below if you are interested in helping out in our classroom this year!

*Please keep in mind that many of these volunteer opportunities require you to have a background check *

Room Teacher	Co-Room Teacher	Character Education	Music
Clerical work at home	Snack	Help with Learning Experiences	
Clerical Admin.	Donate Supplies	Technology	Games/Gym

PHOTO PERMISSION

In the upcoming school year, our class will participate in many fun activities, learning experiences, and more! I take many photos throughout the year to compile into a file. I also post photos on our facebook page throughout the school year. In order to take and post your child's photo, I would like your permission.

Elevate Facebook page: @elevateNIBC

Please circle: I agree I do not agree

Parent Signature: _____