Stud	PLEA	ew Student Infor ASE COMPLETE A be entered as sho		ate
FIRST NAME:			MIDDLE NAME:	
LAST NAME:			GENDER:	M / F
BIRTHDATE:			GRADE ENTERING:	
HOME ADDRESS:			CITY:	
PARENT E-MAIL ADDRESS:			ZIP CODE:	
Child lives @ this address w/	Both Parents	Mother	FatherOther	
HOME PHONE #:			CELL PHONE #:	
MOTHER'S NAME:			FATHER'S NAME:	
PREVIOUS SCHOOL:				
Does the Student have an IEP? (Individualized Education Plan)				Yes/No
Is English the primary language spoken in the home?				Yes/No
Are there any concerns that	would be helpful	for the school to	be aware of:	
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Address Verified_

Yes

No

FOR OFFICE USE ONLY: Student #: