Student Information Sheet

All students of Grades 2-6 are required to update their information. You can forward this blank sheet to any other parent of a child at this school. Once you have forwarded the blank form, please complete. The form will automatically come back to the teacher/school once you are done.

Hello Parents, when completing this form, please ensure that all questions are answered correctly before you submit it.

1. What is the name of the student? Please give the first, middle and last names.

First: _____ Middle: _____ Last: _____

2. Please give your exact street address.

Community/Subdivision: _____
_____

Street: _____
House/Apt#: _____

3. What is the student's gender?

- ☐ Boy/Male
- ☐ Girl/Female

4. What is his/her date of birth? Please give the day month then year.

Day, Month, Year

__ / __ / _____

5. In which grade is the student in this year?

- ☐ Grade 2
- ☐ Grade 3
- ☐ Grade 4
- ☐ Grade 5
- ☐ Grade 6

6. Please give the student's National Insurance Number. If none please write "None"

N.I.B.# _ _ _ _ _ _ _ _ _ _ _ _

7. Please give the mother's full name.

First: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

Last: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

8. Where does the mother work? Please give the name of the company and telephone contact.

Company: _____

Phone #: (242) _ _ _ - _ _ _ _

9. Please give the mother's email address

Email:_____ @_____ . ___

10. Mother telephone contacts

Cell #: (242) _ _ _ - _ _ _ _

Work #: (242) _ _ _ - _ _ _ _

Home# (242) _ _ _ - _ _ _ _

11. With whom does the student live?

Mother

Father

Grandmother/father

Other:
Explain: _____

12. What is the father's name?

First: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

Last _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

13 .Please give the father's telephone contacts

Cell #: (242) _ _ _ - _ _ _ _

Work#: (242) _ _ _ - _ _ _ _

Home# (242) _ _ _ - _ _ _ _

14. Please write the father's email address

Email:_____ @_____ . ___

15. Please give the father's place of employment and contact.

Business: _____ Phone# (242) _ _ _ - _ _ _ _

Employer/Individual Name: _____ Phone#: (242) _ _ _ -_ _ _ _

16. Please give the father's address.

Community/Subdivision: _____ Street: _____ Apt./House#

17. Does your child have any medical conditions or allergies?

Medical Conditions: _____ _____ Allergies: _____ _____

18. Do you have any concerns about your child's academic performance or other that you wish to share?

I am concerned about my child's:_____
_____

19. Does your child have a device for virtual learning?

- [ ] Yes
- [ ] No
- [ ] Yes but my child has to share with another child
- [ ] I am getting a device
- [ ] No I only have a telephone to use

20. Is your child on the National Lunch Program?

- [ ] Yes
- [ ] No
- [ ] No but my child receives lunches

21. Have you applied to be on the National Lunch Program? If yes, please state when you applied.

☐ Yes I applied: Day Month Year
__ __ / __ __ / __ __ __ __

☐ No

22. How does your child get to school?

☐ My child is dropped to school

☐ My child catches the bus

☐ My child walks to school

23. How does your child enter the campus?

☐ Through the main gate on Bernard Road

☐ Through the back gate

24. Does your child have any siblings at this school? Please give the names and grade levels. We can use this form for siblings as well.

Sibling 1: Name: _____ _____ Grade: _____
Sibling 2: Name: _____ _____ Grade: _____
Sibling 3: Name: _____ _____ Grade: _____
Sibling 4: Name: _____ _____ Grade: _____

25. Please give the name and contact of a person who can be contacted in an emergency in case the parents cannot be reached.

First: _____ Last: _____

Phone#(242) __ __ __ - __ __ __ __

26. How does your child get home?

☐ My child is picked up

☐ My child catches the bus

☐ My child walks home after school

Thank you for taking the time to complete this information sheet.