

# Student Information Form



To help us meet your child's needs, please provide us with this important information

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

Lives With: \_\_\_\_\_

Do you have any concerns about your student's academic success?

Are there any custody issues or issues at home that we should be aware of?

What special characteristics should we notice about your child?

What information should we have to make this the best school experience your child has ever had?

Our school has a small grant to assist families who are temporarily living in motels, safe houses, or are doubled up with another family member. Are you in need of these services?      Yes      No

Would you like to have our school counselor contact you regarding your child?      Yes      No