

BETHANY ELEMENTARY STUDENT PERSONAL DATA RECORD

Office Use Only: Teacher _____ ID# _____ Grade (20-21) _____

_____ M ___ F ___
Last First Middle Common Name

_____ _____ _____
Date of Birth Place of Birth (City & State) Social Security Number

_____ _____ _____ _____
Street Address City Zip Home Phone #
Listed? Y N

_____ _____ _____ _____
Mailing Address (If Different) City Zip Cell Phone #

_____ _____
Name and Address of School Last Attended Phone

Has your child been enrolled in Special Education? Yes ___ No ___
If yes, please check all that apply: I.E.P ___ 504 ___ ELL ___ SPEECH ___

Has your child been in Gifted and Talented? Yes ___ No ___

Has your child previously qualified for free or reduced lunch? Yes ___ No ___

**CHECK THE PRIMARY ETHNICITY:
(Please circle all additional ethnicities if there is more than one)**

Hispanic/Latino _____ American Indian/Alaskan Native _____ Black/African American _____
Asian _____ Native Hawaiian/Pacific Islander _____ White _____

Language spoken in the Home _____ Is there a second language? _____

*****PLEASE CONTINUE TO THE BACK*****

PARENTAL INFORMATION

Student lives with: Both Parents ____ Father ____ Mother ____
Grandparent(s) ____ Legal Guardian ____

Father's Name _____ Occupation _____

Place of Employment _____ Phone Number _____

E-mail Address _____ Cell Phone # _____

Mother's Name _____ Occupation _____

Place of Employment _____ Phone Number _____

E-mail Address _____ Cell Phone # _____

EMERGENCY CONTACT: PERSON TO NOTIFY IN CASE OF ILLNESS OR INJURY IF PARENTS ARE NOT AVAILABLE: WE ARE REQUIRED TO HAVE THIS INFORMATION.

Name	Phone Number	Relationship
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Please list everyone that is allowed to pick your child up from school:

PLEASE LIST ANY SIBLINGS THAT ATTEND BETHANY PUBLIC SCHOOLS AND THEIR GRADE FOR THE 2020-2021 SCHOOL YEAR:

PLEASE LIST ALL NON-SCHOOL AGE SIBLINGS AND DATE OF BIRTH:

This signature certifies that the information given on this form is legally accurate and valid, and that the school will be properly informed of changes of residence, phone numbers or status.

Parent or Guardian Signature

Date