

School _____

Grade _____

Student Information Sheet



Student's name: _____

Mailing Address: _____

City and zip code: _____

Mother's name: _____

Mother's cell #: _____ Work #: _____

Father's name: _____

Father's cell #: _____ Work #: _____

Email address: _____

Preferred method of communication: Call Text Email

Emergency Contact (other than parent): _____

Relationship to student: _____ Phone # for Emergency contact: _____

Allergies or health concerns: _____

Homeroom teacher: _____

Approved to check student out at SELCOUTH with picture I.D.:

1. _____

2. _____

My student may/may not (please circle one) use the internet for school purposes only.

My student's picture may/may not (please circle one) be placed on G.T. website and/or Facebook page.