

(PLEASE PRINT LEGIBLY)

Grade: \_\_\_\_\_

### Northside High School - 2016-2017 Student Information

\_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Preferred Name

School Last Attended: \_\_\_\_\_ City / State: \_\_\_\_\_

- Male / Female
- Ethnicity: White / African-American / Hispanic / Asian / American Indian
- Has student ever been served by a Special Education Program? Yes / No
- Has student ever been served by a Gifted Education Program? Yes / No
- Does student have a current IEP? Yes / No                      • Is the student on a 504 Plan? Yes / No
- Is parent / guardian on active duty military? Yes / No
- Is parent / guardian a civilian employed at Ft. Benning? Yes / No
- Primary language spoken in the household: \_\_\_\_\_

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Father / Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Preferred Email: \_\_\_\_\_

Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Home #: \_\_\_\_\_

Mother / Legal Guardian: \_\_\_\_\_

Address (if different than above): \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Preferred Email: \_\_\_\_\_

Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Home #: \_\_\_\_\_

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**Emergency and Checkout Contacts:**

\_\_\_\_\_  
Name                      Cell #                      Relationship

\_\_\_\_\_  
Name                      Cell #                      Relationship

\_\_\_\_\_  
Name                      Cell #                      Relationship

**School-Age Sibling Information:**

\_\_\_\_\_  
Name                      Birthdate                      School

\_\_\_\_\_  
Name                      Birthdate                      School

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date