NORTH COLUMBUS ELEMENTARY

Student Enrollment Information

2025 – 2026

2026 – 2027 School Year

Grade:

Teacher:

Siblings:

PLEASE PRINT		
Student's Information		Gender: M F
LAST	FIRST	MIDDLE
Student's Date of Birth (month/day/year):		
Car Make/Model:	License Plate#:	
Address:		
Name of Enrolling Adult/Parent/Guardian:		
Phone Number:	Work Number:	
E-mail:		
Parent/Guardian 2:	Phone Number:	
E-mail:	Work Number:	
Who does the student live with primarily?		

I understand that the following people are authorized for emergency contact and can checkout and/or pick up my child.

The following people must match who you selected while doing online registration.

Space 1 and 2 should be parent(s) if applicable. Space 3 – 5 should match who you put on the OLR.

Please list in order of importance.

Name	Phone Number	Relationship
1		
2		
3		
4		
5		

Student Health	
Does the student take medication at school? Yes No	Medication:
Food/Drug or other Allergies? Yes No	Allergies:

Transportation: Please CIRCLE your transportation type for morning and afternoon.

Morning	Car Rider Walker Bus Rider Daycare	Car Rider #
Afternoon	Car Rider Walker Bus Rider Daycare Name: _____ NCES Afterschool (pre-selected by lottery)	

Sign: _____

Signature of Parent/Legal Guardian Enrolling Adult