

Student Information Sheet



Student Name:

Date:

Home Address:

Mother's Name:

Cell Phone:

Home Phone:

Email:

Work Phone:

Father's Name:

Cell Phone:

Home Phone:

Email:

Work Phone:

Emergency Contact Name:

Cell Phone:

Home Phone:

Relationship:

Work Phone:

Please list any allergies or medical changes that I need to be aware of:

Please list the names of people who have permission to pick up your child:

Thank you for downloading my FREEBIE! I hope that you enjoy using this in your classroom. Please feel free to email me at solis@solisclass.com if you have any questions, comments or concerns.

Be sure to follow my store, blog, and website for more ideas and freebies!

<http://www.solisclass.com>

<http://www.alsolis.blogspot.com>

Thanks again!
Alma:)



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