

Student Information Sheet

Please fill out these information sheets about your child/my student. I am hoping this enables me to learn a little more about your child and some of the information that I am requesting I would like to have on hand in my personal binder for when we take our outings. Please return these sheets to me when you have finished filling them out. Thanks for your time and help.

Student Name (first & last):

Sibling(s): _____

Date of Birth: _____

Home Address: _____

Home #: (____) _____ - _____

Parent/Guardian Name (first & last):

(1) _____

(2) _____

Work # :

(1) (____) _____ - _____

(2) (____) _____ - _____

Person to be reached in case of emergency
(first and last name):

Home # : (____) _____ - _____

Work # : (____) _____ - _____

Physician's Name (first and last):

Physician's # :

(____) _____ - _____

Hospital Preference :

Medications (types and purposes):

Allergies (peanuts, bees, etc.):

Favorite Food (snack, drink, etc.):

Favorite Game:

Concerns about certain tasks:
(Eating habits, transportation, toileting, etc.)

More “favorites” your son/daughter has:
(Color, movie, etc.)

Anything else that I should be aware of:

Hobbies/Interests:

INTERNET and PICTURE Permission Slip:

- I give permission for my son/daughter to use the Internet under supervision of a teacher in the classroom, in the library, or in the computer lab.
- I **DO NOT** give permission for my son/daughter to use the Internet under supervision of a teacher in the classroom, in the library, or in the computer lab.
- I give permission for my son/daughter to be photographed for educational purposes only (e.g. – pictures displayed in the classroom or on our class/school web page, and used in their portfolio).
- I **DO NOT** give permission for my son/daughter to be photographed for educational purposes only (e.g. – pictures displayed in the classroom or on our class/school web page, and used in their portfolio).