

AMERICUS-SUMTER COUNTY HIGH SCHOOL

805 Harrold Avenue, Americus, Georgia 31709

Phone: (229) 924-3653 Fax: (229) 931-8618 or Registrar (229) 931-8615

Mr. Kimothy Hadley, Principal

Mrs. Marnie Dutcher, Assistant Principal

Mr. Todd Vickery, Assistant Principal

Student Information Sheet

MUST BE BROUGHT TO THE OFFICE IN PERSON

Student's Full Name _____ 9th grade entry _____ Grade _____

Social Security# _____ Ethnic Code _____ Sex _____

Birthplace _____ Birth date _____

Mailing Address _____ City _____ State _____

Physical Address (if above is a P.O. Box) _____

City/State _____ Zip _____ Home Phone _____

Family Information

Mother's Name _____ Home Phone# _____

Address _____ City _____ State _____ Zip _____

Cell/Alternate Phone# _____ E-mail Address _____

Employer _____ Work Phone# _____

Father's Name _____ Phone # _____

Address _____ City/State _____ Zip _____

Cell/Alternate Phone# _____ E-mail Address _____

Employer _____ Work Phone # _____

Guardian's Name (**if different from Mother/Father- legal custody**) _____

Guardian's Relationship to Student _____

Address _____ City/ State _____ Zip _____

Work Phone# _____ Home Phone# _____

In case of emergency, contact _____ Phone # _____

Illness, allergies, or physical health problems _____

Check- Out Information

Please be advised: Anyone checking students out of school must be listed on the student's information sheet and able to provide pictured ID. This will ensure that only authorized individuals are checking out your student. Please provide three additional contacts other than yourself that may check your child out if you are unable to do so. The information on this sheet is not valid without a parent/legal guardian's signature.

Student's Name: _____

Contact One:

Name: _____ Phone # _____

Address: _____ Relationship to Student: _____

Contact Two:

Name: _____ Phone # _____

Address: _____ Relationship to Student: _____

Contact Three:

Name: _____ Phone # _____

Address: _____ Relationship to Student: _____

Parent/legal guardian Signature: _____ Date: _____