School **\_\_\_\_\_\_\_\_\_\_**

**Grundy County School System**

**Pre K Student Data Form**

**2016-2017**

**Student’s Full Legal Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                        Last                                       First                                 Middle

**Date of Birth** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grade** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **Student’s SS #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_          \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_           \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

        Birth City                          Birth County                          Birth State                                Birth Country

**If born outside the U.S**.: Date entered U.S.\_\_\_\_\_\_\_\_\_\_     **Date entered U.S. school:**\_\_\_\_\_\_\_\_\_\_    **From:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                                                                                                              (Country)

**Student’s Sex**:   Male    Female                                              **Race:** \_\_\_\_\_\_\_\_\_\_

**Student lives with**:          Both       Mother          Father          Other:\_\_\_\_\_\_\_\_\_\_

**Custody**:          Both     Mother     Father      Other:

Mother’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email

Mother’s Current Physical/911 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                         Street                        City                    State                    Zip

Mother’s Current Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

       (If different than physical)                               Street                        City                    State                    Zip

Mother’s Home Phone (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Please contact school with address /phone changes, this will keep students record up to date.

Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Current Physical/911Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                               Street                        City                    State                    Zip

Father’s Current Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

       (If different than physical)                            Street                        City                    State                    Zip

Father’s Home Phone (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Please contact school with address /phone changes, this will keep students record up to date

Guardian Current Physical/911 Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                                      Street                        City                    State                    Zip

Guardian Current Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

       (If different than physical)                                               Street                        City                    State                    Zip

Guardian’s Home Phone (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Please contact school with address /phone changes, this will keep students record up to date.

Emergency Contact(s)           \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_             \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Relationship Phone

                                                    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_             \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Relationship Phone

**Car Rider** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **Walker** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **Bus #**\_\_\_\_\_\_\_\_\_\_\_\_

**Miles to School**\_\_\_\_\_\_\_\_\_\_

**Please list anyone that is allowed to pick up your child from school.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent / Guardian Signature**                                   **Date**

**Enrollment Priority Requirements**

**1st Priority**  - Pursuant to state law 49-6-101: students identified as economically disadvantaged. This identification is based on income levels set each year by the Department of Health and Human Services and used during the application process to determine income eligibility for enrollment.

**2nd Priority** - Students with disabilities, students identified as English Language Learners (ELL), in state custody, or those identified as educationally at-risk for failure due to circumstances of abuse or neglect.

**3rd Priority**  - If space for enrollment remains after identifying children who meet Tier 1 or 2, the LEA may enroll any child that meets the age requirement and the requirements set forth by the Community Pre-K Advisory Council (C-PAC). These students are considered unserved or underserved and may be enrolled by the process established by the C-PAC.

Health problems we should be aware of (including any allergies)

Is child on any medication?

If yes, please fill out medication form with the School Nurse.

Circle ALL that you give school permission to do:  Call Doctor          Call Ambulance         Treat

**In case of snow or weather what two numbers would you like us to contact?**

Any other pertinent information:

**Thank you for helping keep your student’s information current.**

\*\*The Grundy County School System does not discriminate on the basis of race, sex, color, religion, national origin, age, handicap in the provision of educational opportunities, activities, or administered programs.

Updated January 23, 2017