

Nickname? _____

Student Information Form

Waldrep

Student's Name _____ **Date of Birth** _____

Address _____

Home Phone _____ **I. D. Number** _____

Mother's Name _____

Address _____

Home/Cell Phone _____ **Work Phone** _____

Home E-mail _____ **Work E-mail** _____

Father's Name _____

Address _____

Home/Cell Phone _____ **Work Phone** _____

Home E-mail _____ **Work E-mail** _____

Guardian's Name _____

Address _____

Home/Cell Phone _____ **Work Phone** _____

Home E-mail _____ **Work E-mail** _____

Medical Concerns/Allergies/etc. (Please explain.):

Copy your class schedule on the back of this paper. Make sure you write the period, subject, teacher's name and room number.