

Student Household Information Form

HOME ADDRESS:

House # Street Name (Indicate N, S, E, W & St., Ave., Cir. Way, Ct., etc.) Unit #

City, State

Zip Code

Move in Date

Residence is: Owned Rented Co-Resident

Is there another family living with you at this address? No Yes If yes, who? _____

If Rented/Leased:

Landlord's Name

Contact Phone #

PREVIOUS HOME ADDRESS:

STUDENT NAME(S):

PARENT/GUARDIAN #1:

(living at the above address)

Last Name

First Name

Middle Initial

_____/_____/_____
Date of Birth

M or F ()
Gender

_____()_____
Home Phone

_____()_____
Cell Phone

_____()_____
Work Phone

Relationship to Student(s) (ie: Parent, Guardian, etc)

Preferred Communication Language

Email Address

PARENT/GUARDIAN #2:

(living at the above address)

Last Name

First Name

Middle Initial

_____/_____/_____
Date of Birth

M or F ()
Gender

_____()_____
Home Phone

_____()_____
Cell Phone

_____()_____
Work Phone

Relationship to Student(s) (ie: Parent, Guardian, etc)

Preferred Communication Language

Email Address

****PLEASE COMPLETE THE FOLLOWING ONLY IF PARENTS LIVE IN SEPARATE HOMES****

2ND HOUSEHOLD:

House #

Street Name (Indicate N, S, E, W & St., Ave., Cir. Way, Ct., etc.)

Unit #

Residence is: Owned Rented Co-Resident

City, State

Zip Code

Move in Date

PARENT/GUARDIAN #1:

(living in the 2nd Household)

Last Name

First Name

Middle Initial

_____/_____/_____
Date of Birth

M or F ()
Gender

_____()_____
Home Phone

_____()_____
Cell Phone

_____()_____
Work Phone

Relationship to Student(s) (ie: Parent, Guardian, etc)

Preferred Communication Language

Email Address

PARENT/GUARDIAN #2:

(living in the 2nd Household)

Last Name

First Name

Middle Initial

_____/_____/_____
Date of Birth

M or F ()
Gender

_____()_____
Home Phone

_____()_____
Cell Phone

_____()_____
Work Phone

Relationship to Student(s) (ie: Parent, Guardian, etc)

Preferred Communication Language

Email Address

Signature of Parent / Guardian / Emancipated Student

Date