

# Student Information Update/Change

West Auburn High School

Date \_\_\_\_\_ Student's name \_\_\_\_\_

Student's date of birth \_\_\_\_\_ Grade \_\_\_\_\_

Information provided on this update/change form will replace information currently on file for your child. When the need to contact a responsible adult, due to a non-emergency, urgent, or informational situation, we want to be able to quickly reach you or someone you designate. Please help us by keeping your child's information current.

### At the home in which the student resides, the following parent/guardian information applies:

Address (include apartment or space number if applicable) \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_  
Home phone number (include area code)

Parent/guardian 1 name \_\_\_\_\_ Parent/guardian 1 work phone (include extension if applicable) \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_  
Parent/guardian 1 cell phone/pager number

Parent/guardian 2 name \_\_\_\_\_ Parent/guardian 2 work phone (include extension if applicable) \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_  
Parent/guardian 2 cell phone/pager number

### In the event a school staff member cannot reach a parent/guardian, I authorize the release of my son/daughter to the person(s) listed below,

Primary emergency contact name \_\_\_\_\_ Work phone (include extension if applicable) \_\_\_\_\_

Address (house number, street, apartment/space number city, state, zip code) \_\_\_\_\_ Cell phone/pager number \_\_\_\_\_

Second emergency contact name \_\_\_\_\_ Work phone (include extension if applicable) \_\_\_\_\_

Address (house number, street, apartment/space number city, state, zip code) \_\_\_\_\_ Cell phone/pager number \_\_\_\_\_

Third emergency contact name \_\_\_\_\_ Work phone (include extension if applicable) \_\_\_\_\_

Address (house number, street, apartment/space number city, state, zip code) \_\_\_\_\_ Cell phone/pager number \_\_\_\_\_

### Complete this area ONLY if you are providing contact information on a parent/guardian NOT living at the same address as the student (address listed above).

Address (include apartment or space number if applicable) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Second household--parent/guardian 1 name \_\_\_\_\_ 2<sup>nd</sup> Household--Parent/guardian 1 home phone \_\_\_\_\_

Relationship to student (circle one please): Both parents, Father only, Mother only, Grandparents, Father & stepmother, Mother & stepfather, Guardian, Agency, Other \_\_\_\_\_ 2<sup>nd</sup> Household--Parent/guardian 1 work phone (include extension) \_\_\_\_\_

Second household--parent/guardian 2 name \_\_\_\_\_ 2<sup>nd</sup> Household--Parent/guardian 2 work phone (include extension) \_\_\_\_\_

Printed name of parent/guardian completing update/change form

Signature of parent/guardian