

# ST AGNES



## Student Information Sheet PRE-K PROGRAM



Student's Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Birthdate \_\_\_\_\_

Student's Religion \_\_\_\_\_

Student's Nickname (*only if used in the classroom*) \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Student's Citizenship \_\_\_\_\_ Ethnicity \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother's Religion \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
(*If different from child's, listed above*)

E-Mail Address \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_ Work Hours \_\_\_\_\_

Work Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Father's Name \_\_\_\_\_ Home Phone \_\_\_\_\_


Father's Religion \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
(*If different from child's, listed above*)

E-Mail Address \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_ Work Hours \_\_\_\_\_

Work Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Please fill out both sides 

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Parent's Marital Status: \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced

If divorced or separated, which parent has legal custody? \_\_\_ Father \_\_\_ Mother \_\_\_ Both  
\_\_\_ Other (*Complete next line*)

Legal Guardian's Name \_\_\_\_\_ Phone \_\_\_\_\_

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After School Arrangements: *How will your child be picked up after school?*

\_\_\_ Car (by whom) \_\_\_\_\_

\_\_\_ Other \_\_\_\_\_

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Authorized Escorts: *Only people authorized by you in writing may pick up your child.*

Person Authorized to Pick Up:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Additional Individuals Authorized to Pick Up:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Additional Individuals Authorized to Pick Up:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

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Participation in Special Programs:

\_\_\_ Special Education / IEP / Resource- List verification area(s): \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ English as second language- First language: \_\_\_\_\_

\_\_\_ Allergies: \_\_\_\_\_

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*Welcome to St. Agnes  
Pre- K Program!*