



2020-2021

STUDENT FILE DATA SHEET

In order to make sure the information we have in our student files is up to date, please fill out and return the following information by Monday, August 24th, 2020. **PLEASE PRINT CLEARLY.**

Student's Name: _____ **Grade:** _____ **Date of Birth:** _____
Address: _____ **City:** _____ **Zip Code:** _____
Home Phone Number: _____ **Last Four Digits of Social Security Number:** _____
Student Lives With: _____
Name of Public Elementary or Middle School student would attend if not St. Nicholas: _____

Mother's Name: _____ **Place of Employment:** _____
Cell Phone: _____ **Work Phone:** _____
Email Address: _____
Address if different from students: _____ **City:** _____ **Zip Code:** _____

Father's Name: _____ **Place of Employment:** _____
Cell Phone: _____ **Work Phone:** _____
Email Address: _____
Address if different from students: _____ **City:** _____ **Zip Code:** _____

Legal Guardian Name: _____ **Place of Employment:** _____
Cell Phone: _____ **Work Phone:** _____
Email Address: _____

Would the **non-residential** parent listed want to receive copies of school correspondence? _____

Emergency Contacts: Please list two emergency contacts who can pick up your child in the event you cannot be reached. **SOMEONE MUST BE ABLE TO BE REACHED AND AVAILABLE TO PICK UP SICK CHILD.**

1. **Name:** _____ **Relationship:** _____ **Phone:** _____
2. **Name:** _____ **Relationship:** _____ **Phone:** _____

Please check one of the following:

- We are registered members of Christ Our Savior Parish
 Our family is not registered at Christ Our Savior Parish – we belong to _____ Church.

PLEASE FILL OUT ONE PER CHILD AND RETURN BY WEDNESDAY AUGUST 26TH, 2020

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