

Student Information Sheet
To be completed by student

Student Name _____ Student ID _____ Book# _____

Student Address _____

Home Number _____

Students Email Address _____

Mother's Full Name _____

Father's Full Name _____

Guardian's Full Name (if not mother or father) _____

Parent/Guardian's Cell Phone Number _____ Circle: Mother Father Guardian

Parent/Guardian's Email Address _____ Circle: Mother Father Guardian

Student Roster

Period	Subject	Teacher	Room
1 st Period			
2 nd Period			
3 rd Period			
4 th Period			
5 th Period			
6 th Period			
7 th Period			
8 th Period			