



RETURNING STUDENT INFORMATION VERIFICATION

Please verify that all the information is current. If you have a change in any area since your 2023/2024 school application, please place a check mark below, and add the correct information. If no changes are indicated, your child's information will remain the same as their **2023/2024** application. If more space is needed, please attach a sheet with the correct information and changes.

Student's Name: _____

PARENTAL INFORMATION

	Mother's Phone/Email: Father's Phone/Email:
	Mother's Employer/Work Phone#: Father's Employer/Work Phone#:
	Marital Status:
	Physical Address:
	Mailing Address:
	Secondary Parent Mailing Address:
	Both Parents Listed on Parent Directory? Please indicate who should be listed.

BACKGROUND INFORMATION

	Church Attendance/Church Address:
	Custody Issues/Custody Papers on File
	Additional Info to Protect your child's heart
	Friends/Family – Pick up preferences/authority

MEDICAL INFORMATION

	Health of Student (Good, fair, poor) & why
	Allergies
	Special Medication
	Special Health Needs
	Child's Physician / Office Name & Phone #
	Insurance
	Consent to Treat

RETURNING STUDENT INFORMATION VERIFICATION SIGNATURE

By signing below, you are verifying that you have indicated a change in an area(s) since your 2023/2024 school application and have listed the current/changed information in its place. If no changes are indicated, you are stating that your child's information is the same as their 2023/2024 application, and the same information will be reflected on your child's FACTS account and used as the ultimate authority for their reenrollment information.

Parent's Signature

DATE

Parent's Signature

DATE