

**JESSAMINE COUNTY SCHOOLS GENERAL INFORMATION SHEET**

Ethnic Codes	
W	- White (not Hispanic)
B	- Black (not Hispanic)
H	- Hispanic
A	- Asian or Pacific Islander
I	- American Indian or Alaska Native
O	- Other

Date \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Student's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ ZIP \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

Place of Birth \_\_\_\_\_ D.O.B. (MM/DD/YY) \_\_\_\_\_

Student's Social Security # \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ Ethnic Code \_\_\_\_\_ (enter code from box above)

Student's E-mail Address \_\_\_\_\_

Child's Country of Origin \_\_\_\_\_ First language your child learned to speak \_\_\_\_\_

Language your child speaks most often \_\_\_\_\_ Primary language spoken in the home \_\_\_\_\_

Father's Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_

Nationality \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Occupation \_\_\_\_\_ Where Employed \_\_\_\_\_ E-mail \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_

Nationality \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Occupation \_\_\_\_\_ Where Employed \_\_\_\_\_ E-mail \_\_\_\_\_

**CHILD IS LIVING WITH**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Proof of Guardianship (Court Document) \_\_\_\_\_

Student's Physician \_\_\_\_\_ Physician's Phone \_\_\_\_\_

Student's Dentist \_\_\_\_\_ Dentist's Phone \_\_\_\_\_

Indicate any physical problems the child might have \_\_\_\_\_

Last School Attended \_\_\_\_\_ County/City/State \_\_\_\_\_

List Emergency Numbers Mother \_\_\_\_\_ Father \_\_\_\_\_

Other Emergency Names and Numbers \_\_\_\_\_

GIVE NAMES AND AGES OF ALL CHILDREN UNDER EIGHTEEN IN YOUR HOUSEHOLD:			
Name	Date of Birth	School Attending	Grade

**WE MUST KEEP A COPY OF THE FOLLOWING INFORMATION:**

- BIRTH CERTIFICATE     
  IMMUNIZATION RECORD     
  PHYSICAL  
 SOCIAL SECURITY NUMBER     
  EMERGENCY PHONE NUMBERS

Teacher \_\_\_\_\_ Entry Code \_\_\_\_\_ Bus # \_\_\_\_\_ Transportation Code (circle one)