

ADDITIONAL CONTACT ATTACHMENT

Select one of the following relationship definitions for each contact:

- | | | | | | |
|---------------|---------------|----------------|-------------|-------------|--------------|
| Mother | Father | Parents | Step-Mother | Step-Father | Step-Parents |
| Foster Mother | Foster Father | Foster Parents | Grandmother | Grandfather | Grandparents |
| Aunt | Uncle | Sister | Brother | Guardian | Caseworker |
| Spouse | Neighbor | Friend | Self | Other | |

4. Additional Contact Person(s)

_____, _____
 Prefix Last Name First Name MI Suffix

Relationship: _____

Has permission to pick up student? Y N Notes: _____

Contact should receive information about the following:

- Attendance Scheduling Grading Discipline Mailings Testing Medical

Highest Level of Education Completed: _____ Preferred Language: _____

Phone Information:

Phone Number: _____ Ext: _____ Unlisted Description: _____
 (Home, Dad's Cell, Mom's Work, etc)

Emergency Number: _____ Ext: _____ Unlisted Description: _____

Work1 Phone: _____ Ext: _____ Unlisted Employer: _____

Work2 Phone: _____ Ext: _____ Unlisted Employer: _____

Cell Phone: _____ Ext: _____ Unlisted Description: _____

Email address: _____ Email address: _____

Residential Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Select one of the following relationship definitions for each contact:

Mother	Father	Parents	Step-Mother	Step-Father	Step-Parents
Foster Mother	Foster Father	Foster Parents	Grandmother	Grandfather	Grandparents
Aunt	Uncle	Sister	Brother	Guardian	Caseworker
Spouse	Neighbor	Friend	Self	Other	

5. Additional Contact Person(s)

_____, _____
Prefix Last Name First Name MI Suffix

Relationship: _____

Has permission to pick up student? Y N Notes: _____

Contact should receive information about the following:

Attendance Scheduling Grading Discipline Mailings Testing Medical

Highest Level of Education Completed: _____ Preferred Language: _____

Phone Information:

Phone Number: _____ Ext: _____ Unlisted Description: _____
(Home, Dad's Cell, Mom's Work, etc)

Emergency Number: _____ Ext: _____ Unlisted Description: _____

Work1 Phone: _____ Ext: _____ Unlisted Employer: _____

Work2 Phone: _____ Ext: _____ Unlisted Employer: _____

Cell Phone: _____ Ext: _____ Unlisted Description: _____

Email address: _____ Email address: _____

Residential Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____