

Enrollment Form for Sterling High School

***Student Personal Information***

Student Last Name:	First:	Middle:	Grade:	Birth Date:
Address:	City, State, Zip:		Gender:	Race:
Social Security Number:		Locker No.		
Home Phone:	Student Cell Phone:	Student Email Address:		

***Custodial Parent/Guardian***

<u>Father/Guardian</u>	<u>Mother/Guardian</u>
Name:	Name:
Employer:                  Emp. Address:	Employer:                  Emp. Address:
Work Phone:                  Cell Phone:	Work Phone:                  Cell Phone:
Email Address:	Email Address:

***Non-Custodial Parent***

Receives copies of mailings?    Yes    No

<u>Parent/Stepparent</u>	<u>Spouse</u>
Name:	Name:
Employer:                  Emp. Address:	Employer:                  Emp. Address:
Work Phone:	Emp. Address:
Home Address:	Work Phone:                  Cell Phone:
Home Phone:                  Cell Phone:	Email Address:
Email Address:	

***Emergency Contact Information***

(Use this information to enter an additional contact in case of emergency.)

Emergency Contact Name:	Relationship to Student:
Emergency Contact Address:	Emergency Contact Home Phone:
Emergency Contact Work Phone:	Emergency Contact Cell Phone:
Hospital Preference:	Family Physician:                  Physician Phone:

Medical Notes:

***Miscellaneous Information***

Bus Transportation Required:    Yes                  No

Note: The Kansas State Law now requires that student's legal name is to be on file. If the above name is not the student's legal name, please fill in the information below:

Student's Legal Name: \_\_\_\_\_