

Dike-New Hartford Schools Student Information for 2018-2019

Name: _____ Soc Sec No: _____

(Required for High School Testing)

Grade: _____ Sex: _____ Birthdate: _____ Birthplace: _____

(Please Circle)

(Please Circle)

Primary Home Language: Eng Spanish Other **Ethnicity:** H = Hispanic or Latino N = Non Hispanic or Latino

Race: B = Black or African American I = American Indian or Alaska Native P = Native Hawaiian or Pacific Islander
W = White A = Asian

Primary Parents / Guardian the School Should Contact

Name _____ Relation _____

Address _____ Email _____

City, State, Zip _____ Cell Phone (dad) _____

Home Phone _____ Work Phone (dad) _____

Cell Phone (mom) _____ Work Phone (mom) _____

Emergency Contact if Parent / Guardian Cannot Be Notified:

Name _____ Relation _____

Home Phone _____ Cell Phone _____ Work Phone _____

STUDENT MEDIA PERMISSION: I hereby give permission to the Dike-New Hartford Community School District to use my child's image, student work, or photo for non-profit purposes. This includes the use of my child's image in video recordings by the District. (Examples include, but are not limited to: DNH website and Facebook page, classroom Google websites, school sponsored field trips.) By signing this form, it will serve as permission for my child for the duration of his/her enrollment in the Dike-New Hartford Community School District.

Your signature allows the above statements to be effective. (If not signed, we assume permission is not granted.)

Parent/Guardian Signature

FIELD TRIPS: My child has my permission to attend school sponsored field trips where transportation will be provided by the school either by school car or bus. By signing this form, it will serve as permission for my child for the duration of his/her enrollment in the Dike-New Hartford Community School District.

Your signature allows the above statements to be effective.

Parent/Guardian Signature