



HOUSEHOLD UPDATE FORM

Please fill in student name(s) and only the information that has changed.

- Registrar
- Nurse
- Food Service
- Transportation
- Library
- Re-Enrollment (DO < 1 yr)

STUDENT NAME: _____

Grade: _____

STUDENT NAME: _____

Grade: _____

STUDENT NAME: _____

Grade: _____

Student lives with: Both Parents (In one Household) Mother Only Father Only Joint Custody Other

Mother/Guardian _____

Home Phone _____

Cell Phone _____ Work Phone _____

Email _____

Father/Guardian _____

Home Phone _____

Cell Phone _____ Work Phone _____

Email _____

Physical Address _____ City _____ State MO Zip _____

Mailing Address _____ City _____ State MO Zip _____

Homeless Status Verified by: _____ Date: _____

Comments:

EMERGENCY CONTACTS – Other Than Parents

In the event the parents cannot be reached, please provide contact information for up to 3 individuals to whom the student(s) may be released.

Name / Relationship M / F Home Phone _____ Cell Phone _____

Name / Relationship M / F Home Phone _____ Cell Phone _____

Name / Relationship M / F Home Phone _____ Cell Phone _____

SECONDARY MAILING (Optional Parent/Guardian Use Only)

Name / Relationship M / F Home Phone _____

Cell Phone _____ Work Phone _____ Email _____

Physical Address _____ City _____ State _____ Zip _____

SCHOOL REACH NUMBERS

School Reach is used to notify parents/guardians of announcements such as school closings, early releases, etc.

(____) _____ -- _____
School Reach Primary Phone #

(____) _____ -- _____
School Reach Secondary Phone #

Parent Signature

____/____/____
Date

**Please Note: If you have a change of address, Proof of Residency is required.....
Current Utility Bill, 2010 Real Estate Tax Receipt, Lease Agreement, Mortgage Statement, or Rent Receipt**