## SHERWOOD SECONDARY SCHOOL CHANGE OF STUDENT INFORMATION

eSIS Pupil # Gender: Legal Last Name: Legal First Name: Usual Last Name: Preferred First Name: Birth Date: (DD)(MM)(YY) Proof of Age: Home Phone Number: Listed □ Unlisted □ Address: Apt# Street Address City Postal Code: Mailing Address (if different from above): PARENT INFORMATION Who do you live with? Parents □ Guardian □ Other □ Mother □ Father □ Self □ Custody: Joint □ Mother □ Father □ Guardian □ N/A □ Father:					
Legal Last Name: Legal First Name:   Usual Last Name: Preferred First Name:   Birth Date: (DD) (MM)   (YY) Proof of Age:   Home Phone Number: Listed □   Home Phone Number: Listed □   Address:	STUDENT INFORMATION				
Usual Last Name: Preferred First Name: Birth Date: (DD)(MM)(YY) Proof of Age: Home Phone Number: Listed □ Unlisted □ Address: Apt# Street Address City Postal Code: Mailing Address (if different from above):  PARENT INFORMATION Who do you live with? Parents □ Guardian □ Other □ Mother □ Father □ Self □ Custody: Joint □ Mother □ Father □ Guardian □ N/A □ Father: Last Name First Name Address if Different from Student Employer Phone Number Mother:	eSIS Pupil #	Gender:			
Birth Date: (DD)(MM)(YY) Proof of Age:	Legal Last Name:				
Home Phone Number: Listed Unlisted   Address:	Usual Last Name:				
Address:	Birth Date: (DD) (MM) (YY)				
Apt# Street Address City Postal Code:     Mailing Address (if different from above):     PARENT INFORMATION     Who do you live with? Parents Guardian Other   Mother = Father = Self   Custody: Joint Mother Father   Last Name First Name Address if Different from Student Employer   Phone Number	Home Phone Number:	Listed  Unlisted			
Who do you live with? Parents       Guardian       Other       Mother       Father       Self         Custody: Joint       Mother       Father       Guardian       N/A         Father:	Address:	City		Postal Code:	
Custody: Joint Different from Student Employer Phone Number	PARENT INFORMATION				
Father:	Who do you live with? Parents  Guard	ian  Other Mother	Father 🗆	Self □	
Last Name     First Name     Address if Different from Student     Employer     Phone Number       Mother:	Custody: Joint  Mother  Father	Guardian 🗆 N/A 🗆			
Mother:					
	Last Name First Name Address in	f Different from Student	Employer	Phone Number	
	Mother:	f Different from Student	Employer	Phone Number	

Guardian:							
	Last Name	First Name	Address if Different from Student	Employer	Phone Number		

## **EMERGENCY CONTACT INFORMATION – you must complete this section**

In the event of an emergency, please provide the names of two people that we may contact during the school day:

(indicate whether the telephone number is home, cell, business or pager)

First & Surname of Emergency Contact	Relationship to Student	Daytime	e Telephone	Numbe	ər
		Home	business 🗆	cell 🗆	pager
		Home 🗆	business 🗆	cell 🗆	pager
		Daytime Telephone Number			
First & Surname of Emergency Contact	Relationship to Student	Daytime	e Telephone	Numbe	er
First & Surname of Emergency Contact	Relationship to Student	Daytime Home □	e Telephone business □	e Numbe cell □	er pager
First & Surname of Emergency Contact	Relationship to Student		•		
First & Surname of Emergency Contact	Relationship to Student		•		

COMPLETED BY:

DATE: