WVEIS#		(1)		Teacher	
	Student Emergen	cy Contact I	nformation	า	
Student's Name			Grade	Birth Da	te
Last	First	Middle			
Physical Address	MIT				2
Address		City		State	Zip
Mailing Address					
Address		City		State	Zip
Custodial Parent/Guardian			Relation	ship	
Address (if different from student)		\$			-
Phone (Home)	_(Cell)	(Par	ent's e-mail)		-
Place of Employment		(work p	phone)		ext
Second Parent/Guardian			Relations	hip	75
Address (if different from student)					
Phone (Home)	_(Cell)	(Par	ent's e-mail)		¥
Place of Employment		(work p	phone)		ext
Physician's Name/address					
Dentist's Name/address				Phone	
Names & Grades of Brothers/Sisters_					
Persons Who Will Assume Responsibility	(2) v if Parent Cannot Be	Contacted	Student's Nar	me	
Name		Relationship to Student			
Home Phone	CellPhon	e	Work I	Phone	
Name		Relationship to S	tudent		
Home Phone	CellPhon	e	Work I	Phone	
Name					
Home Phone	CellPhon	e	Work F	Phone	
Please keep in mind that any person listed in after showing proper identification. If there cent Court Orders and complete a new emerg Are there any custody issues concerning your In case of accident or serious illness, the	are any custody issues of gency card. child?If so, have school will contact the	or changes, you goe you provided to parent/guare	must provide the school with	the school with an the Court Order	rs? to contact the par-
ent or designated person, arrangements parent/guardian.					•
Parent Signature			Date_		
The following information must be on file as Does your child speak a native language othe Does either parent speak a native language o	r than English?	If yes, which	language?		

Ethnicity/Race of Student _____