

Student Information Sheet

Last Name _____ First Name _____ Middle I. _____

Home Phone _____ Emergency Phone _____

Birthday _____ (please include year)

Parent or Guardian _____ Relationship: _____

Home Address _____

City _____ State _____ Zip Code _____

E-Mail Address _____

Homeroom Teacher _____

Favorite Color _____ Favorite Candy _____

Favorite Soda _____

Hobbies _____

What is your favorite subject? _____

What do you want your teacher to know about you? _____

Do you have a cell phone? _____ Does it take pictures? _____

Can it do video? _____ Internet Access? _____