

RICHARD M. TEITELMAN SCHOOL

STUDENT INFORMATION

ID# _____

Grade Level (Circle) 7 8

NAME _____
First Middle Last Alternative Family Name

BIRTHDATE ____/____/____ PLACE OF BIRTH _____

ETHNIC GROUP: Asian - Pacific Islander - African-American – Hispanic – Caucasian - Other(Specify) _____

MUNICIPALITY: (Circle One) Cape May - Cape May Point - Lower Township - West Cape May SEX: Male/Female

PRIMARY HOUSEHOLD INFORMATION:**LIVING WITH:** (Check One) Father & Mother _____ Mother Only _____ Father Only _____ Grandparent _____ Guardian _____

PHONE NUMER (Home) _____ EMAIL(Parent/Guardian) _____

ADDRESS _____ Town _____ Zip _____

First Name	Last Name	Employer	Work Phone#	Cell Phone#	Relationship to Student

First Name	Last Name	Employer	Work Phone#	Cell Phone#	Relationship to Student

SECONDARY HOUSEHOLD (IF APPLICABLE):**LIVING WITH:** (Check One) Father & Mother _____ Mother Only _____ Father Only _____ Grandparent _____ Guardian _____

PHONE NUMER (Home) _____ EMAIL(Parent/Guardian) _____

ADDRESS _____ Town _____ Zip _____

First Name	Last Name	Employer	Work Phone#	Cell Phone#	Relationship to Student

First Name	Last Name	Employer	Work Phone#	Cell Phone#	Relationship to Student

EMERGENCY CONTACTS: YOUR CHILD WILL ONLY BE PERMITTED TO BE PICKED UP FROM SCHOOL BY PEOPLE LISTED ON THIS FORM (ADD ANY ADDITONAL NAMES AND NUMBERS ON THE BACK)

Name	Address	Home#	Work #	Cell#	Relationship to Student

Name	Address	Home#	Work #	Cell#	Relationship to Student

Name	Address	Home#	Work#	Cell#	Relationship to Student

Name	Address	Home#	Work#	Cell#	Relationship to Student

FAMILY DOCTOR: _____ Phone Number _____

Is mother, father or guardian involved with the Armed Forces or a Federal Employee? Yes _____ No _____