



Family Information

1.D. Family Information

1st Parent/Guardian: _____ Male Female

First Middle Last

Address: _____

Street Town/City State Zip Telephone

(Mark all that apply)

Residing Mailing Pick-up Drop off Other: specify _____

(Parent/Guardian's level of education)

Less than high school Diploma or G.E.D. Some college or technical school

2nd Parent/Guardian: _____ Male Female

First Middle Last

(If living separately)

Address: _____

Street Town/City State Zip Telephone

(Mark all that apply)

Residing Mailing Pick-up Drop off Other: specify _____

(Parent/Guardian's level of education)

Less than high school Diploma or G.E.D. Some college or technical school

(If family is migrant)

Home base address: _____

Street Town/City State Zip Telephone

All children's names & ages:

#1 _____ #2 _____

#3 _____ #4 _____

#5 _____ #6 _____

Language spoken at home: Spanish English Other _____

Parents want to receive material in: Spanish English Other _____
