

LINCOLN PARK HIGH SCHOOL ENROLLMENT DATA SHEET

Please review the data on this form and make corrections if necessary.

This form MUST be completed, signed and presented by the student during Quickstart

NO PROGRAM WILL BE ISSUED TO A STUDENT WITHOUT THIS FORM

STUDENT ID NUMBER _____ DIVISION _____

STUDENT'S NAME: _____
LAST FIRST MIDDLE

HOME ADDRESS _____

HOME PHONE NUMBER: () _____ ZIPCODE _____

EMAIL ADDRESS _____

FATHER'S NAME _____

MOTHER'S NAME _____

GUARDIAN'S NAME _____

PRIMARY LANGUAGE SPOKEN AT HOME _____

PLEASE SUPPLY THE FOLLOWING INFORMATION FOR EMERGENCY USE ONLY. IF A STUDENT BECOMES ILL OR MEETS WITH AN ACCIDENT, AND THE SCHOOL IS UNABLE TO REACH A PARENT OR GUARDIAN, IT IS NECESSARY TO HAVE THE NAME AND TELEPHONE NUMBER OF A RELATIVE OR NEIGHBOR WHO MAY BE CONTACTED. *DO NOT REPEAT HOME PHONE NUMBER.*

NAME _____ RELATIONSHIP TO STUDENT _____

PHONE NUMBER _____ ADDRESS _____

NAME _____ RELATIONSHIP TO STUDENT _____

PHONE NUMBER _____ ADDRESS _____

FATHER'S WORK DATA

OCCUPATION _____

NAME OF COMPANY _____

PARENT'S WORK NUMBER _____

BUSINESS HOURS _____

MOTHER'S WORK DATA

OCCUPATION _____

NAME OF COMPANY _____

PARENT'S WORK NUMBER _____

BUSINESS HOURS _____

ADDITIONAL CONTACT NUMBERS:

THE ABOVE INFORMATION IS CORRECT AND COMPLETE. I UNDERSTAND THAT ENTRY TO LINCOLN PARK HIGH SCHOOL BASED UPON MISLEADING OR FALSE INFORMATION MAY CAUSE CANCELLATION OF ENROLLMENT AT LINCOLN PARK HIGH SCHOOL.

STUDENT SIGNATURE _____

DATE _____

PARENT SIGNATURE _____

DATE _____