



Forestville Central School Student Information Form

Forestville Elementary School	(716) 965-2742
Forestville Middle/High School	(716) 965-2711
Forestville District Office	(716) 965-6539
Forestville Business Office	(716) 965-6546

Student Information:

Legal Name: _____ Entering Grade: _____
 (Last) (First) (Middle)

Name Student Uses: _____ ☐ Boy ☐ Girl

Last School Attended: _____
 School Address School Phone

Date of Birth: _____ Place of Birth _____
 MM/DD/YYYY (City) (State) (Country)

Primary Parent(s) or Guardian(s) with Whom Student Resides:

Name _____
 (Last) (First) (MI)

Home Address _____
 (Street, Apt No.) (City) (State/Zip)

Mailing Address _____
 (Street, Apt No.) (City) (State/Zip)

Employer _____ Work Phone _____

Name _____
 (Last) (First) (MI)

Home Address _____
 (Street, Apt No.) (City) (State/Zip)

Mailing Address _____
 (Street, Apt No.) (City) (State/Zip)

Employer _____ Work Phone _____

Secondary Parent/Guardian with Whom Student Does Not Reside:

Name _____
 (Last) (First) (MI)

Home Address _____
 (Street, Apt No.) (City) (State/Zip)

Mailing Address _____
 (Street, Apt No.) (City) (State/Zip)

Employer _____ Work Phone _____

☐ Mother ☐ Stepmother ☐ Foster Parent
☐ Father ☐ Stepfather ☐ Legal Guardian
 Home Phone _____
 Cell Phone _____
 E-mail _____

Town of Residence _____

☐ Mother ☐ Stepmother ☐ Foster Parent
☐ Father ☐ Stepfather ☐ Legal Guardian
 Home Phone _____
 Cell Phone _____
 E-mail _____

Shares Custody: ☐ Y ☐ N
☐ Mother ☐ Stepmother ☐ Foster Parent
☐ Father ☐ Stepfather ☐ Legal Guardian
 Home Phone _____
 Cell Phone _____
 E-mail _____

Receives Mailings: ☐ Y ☐ N

Please indicate below any child custody information or restrictions that may be important for your child's school to know.
 Documentation will be required to verify restrictions of contact, custody, or information from a biological parent.

Custody Information:

☐ Two parents at home ☐ Joint Custody ☐ Sole Custody ☐ Separated
☐ Single Parent ☐ Foster Placement ☐ Other _____

Restrictions of Student Contact and Information:

☐ Restriction of Contact/Custody Attached
☐ Order of Protection ☐ Custody Agreement ☐ Other documentation _____
 Person(s) Restricted _____ Expiration Date _____



Forestville Central School Student Information Form – page 2

Names of ALL children in family – List last name if different:

Name	Relationship	Birthdate (MM/DD/YYYY)	Lives in the Home
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N

Please list up to five persons who may be contacted in case of emergency, in the order of preference, including parent(s) or legal guardian(s).

Name	Relationship	Address	Phone 1	Phone 2

Doctor's Name: _____ Phone: _____

Is this child covered by a medical insurance plan or HMO (Health Maintenance Organization)? ☐ Y ☐ N

If yes, name of provider _____

IN AN EMERGENCY, WHEN WE CANNOT BE CONTACTED, THE SCHOOL AUTHORITIES HAVE OUR PERMISSION TO USE THEIR BEST JUDGMENT IN THE INTEREST OF OUR CHILD'S HEALTH AND WELFARE. THE SCHOOL ASSUMES NO FINANCIAL RESPONSIBILITY.

Signature: _____ Date _____

Other than the parent(s) and persons listed above, please list any additional persons who may pick up the child at school.

Name	Relationship	Address	Phone 1	Phone 2

In the event of an unscheduled dismissal or evacuation of the school, please provide specific instructions for your child:

☐ Go home by him/herself ☐ Go home with _____ ☐ Go to _____

☐ Other (explain) _____

Signature _____ Date _____

The Forestville Central School District does not discriminate in its employment and admission to programs and activities as applicable, on the basis of actual or perceived race, color, creed, sex, sexual orientation, national origin, religion, age, economic status, marital status, veterans' status, political affiliation, domestic victim status, use of a guide dog, hearing dog or service dog, disability, or other classifications protected under federal or state law, and provides equal access to the Boy Scouts and other designated youth groups. The designated district compliance officers will coordinate compliance with the nondiscrimination requirements of Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, as amended, the Boy Scouts of America Equal Access Act, and the New York State Human Rights Law.

The Forestville Central School District Compliance Officers are: Superintendent, 12 Water Street, Forestville, NY 14062 (716) 965-6539 MS/HS Principal, 4 Academy Street, Forestville, NY 14062 (716) 965-2711 Elem Principal, 12 Water Street, Forestville, NY 14062 (716) 965-2742 Complaints may also be filed with the Office for Civil Rights, New York Office, U.S. Department of Education, 32 Old Slip, 26th Floor, New York, NY 10005-2500, phone (646) 428-3800, fax (646) 428-3843, email: OCR.NewYork@ed.gov.