

NON-CUSTODIAL PARENT DENIED ACCESS: YES _____ NO _____

**FAMILY INFORMATION FORM
BETHEL PARK SCHOOL DISTRICT
Bethel Park, Pennsylvania 15102**

Office Use Only:
STUDENT # : _____ ENTRY CODE: _____
DATE OF ENTRY: _____

NAME _____

Date of last attendance in former school _____

ADDRESS _____

In what grade was pupil previously enrolled: _____

Street

Were all requirements of grade satisfactorily completed? _____

City/Zip

DATE OF BIRTH _____ SEX _____

Last school attended _____

PLACE OF BIRTH _____

Address of school _____

TELEPHONE _____

Other schools attended _____

SECOND MAILING MAY BE SENT TO NON-CUSTODIAL PARENT. PLEASE INDICATE 2ND MAILING ADDRESS BELOW.

Parent/Guardian's Name _____

Parent/Guardian's Name _____

Physical:

- Corrective lenses ()
- Handedness (L or R) ()
- Hearing Aid ()
- Speech Disability ()
- Other ()

Address (if different from student) _____

Address (if different from student) _____

Employer _____ Telephone _____

Employer _____ Telephone _____

Student lives with: _____

CHILDREN OF FAMILY (including student) in order of age, oldest first:

First Name	Date of Birth	Sex	School Attending	Grade
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

*Custody Papers
Requested to be
kept on file
Yes _____ No _____*

OTHERS LIVING IN HOME: Name _____ Relationship _____

PARENT/GUARDIAN SIGNATURE _____ Date _____

School Year _____