

# Request to Add or Change Contact Information

Student Name(s): \_\_\_\_\_ Date: \_\_\_\_\_

Name of Person Requesting Addition/Change: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

**Legal Guardian Information changes**

Name of Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ cell/home

Emergency Phone: \_\_\_\_\_ cell/home

Work Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

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| <p style="text-align: center;"><b><u>RELATIONSHIP TO STUDENT</u></b></p> <ul style="list-style-type: none"><li>• Mother</li><li>• Father</li><li>• Step Father</li><li>• Step Mother</li><li>• Sibling</li><li>• Grandmother</li><li>• Grandfather</li><li>• Aunt</li><li>• Uncle</li><li>• Caregiver</li><li>• Family Friend</li><li>• Neighbor</li><li>• Host Parent</li><li>• Doctor</li><li>• Court Appointed Guardian</li><li>• Agency Representative</li><li>• Other relationship</li><li>• Other relative</li></ul> |
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**Other Contacts:**

**(Circle one) Do you want to: Add, Delete, Update?**

Name of Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Is this person someone we can release your child to? Yes No

**(Circle one) Do you want to: Add, Delete, Update?**

Name of Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Is this person someone we can release your child to? Yes No

<p>Entered in Zangle Date: _____ Initials: _____ Once entered file in Enrollment Form Binder behind student's enrollment form.</p>
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_