

## Student Emergency Information 2021-2022

**Student's Name** \_\_\_\_\_

**DOB** \_\_\_\_\_ **M/F** \_\_\_\_\_ **Grade** \_\_\_\_\_ **Teacher** \_\_\_\_\_

	Parent/Guardian <b>Call 1<sup>st</sup></b>	Parent/Guardian <b>Call 2<sup>nd</sup></b>
Name	_____	_____
Address	_____	_____
	_____	_____
Employer	_____	_____
Work #	_____	_____
Cell #	_____	_____
Email	_____	_____

**When Parents cannot be reached call the following:**

Call	#1	#2	#3
Name:	_____	_____	_____
Cell #	_____	_____	_____
Phone #	_____	_____	_____
Relationship	_____	_____	_____

### Medical Information:

Physician: _____	Phone # _____
Dentist: _____	Phone # _____
Preferred Hospital: _____	



### ***EMERGENCY DISMISSAL INFORMATION***

In the event of the need to utilize an Emergency Dismissal from school, Parents/Guardians will be called first to pick up their child(ren). If parents/guardians are unable to be reached, the Emergency Contacts listed on the first page will be contacted for pick up.

1. Student can walk home: Yes \_\_\_\_\_ No \_\_\_\_\_
2. Student can take the bus home (***IF AVAILABLE***): Yes \_\_\_\_\_ No \_\_\_\_\_
3. Student will be picked up by emergency contact person(s): Yes \_\_\_\_\_ No \_\_\_\_\_

I have informed my child(ren) to follow these instructions: Yes \_\_\_\_\_ No \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please contact the school office with any changes and share any health changes with the school Nurse.***