

**CENTENNIAL JUNIOR HIGH  
STUDENT INFORMATION FORM**

The District is requesting this information under the authority of PL 94-142, Title IV of the Civil Rights Law and State Administrative Rule R227-726 (1-5).

This information will be handled confidentially and will be used only for the purpose noted in the law or rule. This information will not subject you to any unfair or discriminatory treatment.

<b>FOR SCHOOL USE ONLY:</b>	Proof of Residence		Variance		Track	Birth Certificate		Special Concerns		Teacher				
Student's Legal Last Name	Legal First Name	Middle Name	Suffix	Preferred Last Name	Preferred First Name	Date of Birth	Grade in School	Student SSNo						
<input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnic Origin: <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> No Response													
School Last Attended _____ Address _____						If Born Outside U.S. What Country _____ Date Entered U.S. _____								
<b>Father Guardian Information</b>						<b>Mother Guardian Information</b>								
Last Name		First Name		Middle	Suffix	Last Name		First Name		Middle	Suffix			
Address		City	State	Zip	Apt #	Home Phone		Address		City	State	Zip	Apt #	Home Phone
Mailing Address (if different)		City	State	Zip	Apt #	Cell/Alt Phone		Mailing Address (if different)		City	State	Zip	Apt #	Cell/Alt Phone
Workplace:			Economic Guardian <input type="checkbox"/> Yes <input type="checkbox"/> No			Workplace:			Economic Guardian <input type="checkbox"/> Yes <input type="checkbox"/> No					
Work Phone: _____ Ext. _____			Resides With <input type="checkbox"/> Yes <input type="checkbox"/> No			Work Phone: _____ Ext. _____			Resides With <input type="checkbox"/> Yes <input type="checkbox"/> No					
Mailings <input type="checkbox"/> Yes <input type="checkbox"/> No						Mailings <input type="checkbox"/> Yes <input type="checkbox"/> No								
Email Address					Last 4 Digits of SSNo for online lunch payment		Email Address					Last 4 Digits of SSNo for online lunch payment		
<b>Other Guardian Information</b>						<b>Physical Status of Student</b>								
Last Name		First Name		Middle	Suffix	<input type="checkbox"/> Glasses/Contacts <input type="checkbox"/> Hearing Aid <input type="checkbox"/> Physical Problems <input type="checkbox"/> Daily Medication								
Address						Health Problems:								
City State Zip Apt # Home Phone						Special assistance required for student to attend school: <input type="checkbox"/> Transportation <input type="checkbox"/> Adult Assistance <input type="checkbox"/> Wheelchair <input type="checkbox"/> Special Equipment								
Mailing Address (if different) City State Zip Apt # Cell/Alt Phone						<b>Physician</b>								
						Physician			Phone Number					
Workplace:						<b>Special Programs student currently receives</b>								
Work Phone: _____ Ext. _____						<input type="checkbox"/> 504 <input type="checkbox"/> ESL <input type="checkbox"/> Spec Ed/Resource <input type="checkbox"/> Title I <input type="checkbox"/> Spec Ed. Preschool <input type="checkbox"/> Speech and Language								
Mailings <input type="checkbox"/> Yes <input type="checkbox"/> No														
Email Address					Last 4 Digits of SSNo for online lunch payment		<b>Absence Notification</b>							
											<input type="checkbox"/> Email <input type="checkbox"/> Internet <input type="checkbox"/> Phone <input type="checkbox"/> No Notification			
What language does your son or daughter speak most often at home? _____						What is the first language your son or daughter learned to speak? _____								
What language do you speak most often at home (parents or guardians)? _____						What is the first language you learned to speak (parent or guardians)? _____								

Emergency Contacts and Authorization to Pick Up (enter at least two)					Preschool Children in Home	
Contact (other than guardian)	Relationship	Phone Number	Ext.	Cell/Alt. Phone	Name	Birthday

Father Military/Federal Employment Information	Federal Facilities/Codes
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**Military**  
Active duty in Military:  Yes  No Date Activated: \_\_\_\_\_  
Military:  U.S. Military  Non U.S. Military Non U.S. Military Country: \_\_\_\_\_  
Branch:  Air Force  Air Force Reserve  Army  Army National Guard  Army Reserve  Coast Guard  Coast Guard Reserve  
 Marine Corps  Marine Corps Reserve  Navy  Navy Reserve Other \_\_\_\_\_  
Rank: \_\_\_\_\_ Unit: \_\_\_\_\_

- 3 – Hill Air Force Base  
Clearfield
- 4 – AF Plant #78  
Brigham City
- 5 – A N G Facility  
Salt Lake City Intl. Arprt #1, SLC
- 6 – ARSR Site  
Francis Peak
- 7 – Dugway Proving Grds  
Tooele, Dugway
- 8 – Fed Depot  
Clearfield
- 9 – Federal Admin Bldg  
1745 W. 1700 S. Redwood Rd., SLC
- 10 – Fort Douglas  
Salt Lake City
- 11 – NG Facility  
Camp Williams, Lehi
- 12 – Tooele Army Depot  
Tooele
- 13 – VA Hosp  
500 Foothill Dr – Ft Douglas Sta., SLC
- 15 – IRS  
1160 West 1200 South, Ogden
- 16 – Alliant Tech  
Bacchus Works Magna – Plant 81
- 17 – Army Reserve Center  
Salt Lake City
- 18 – Courthouse & Fed Office Bldg  
25<sup>th</sup> St – Grant Ave – 24<sup>th</sup> St – Kiesel St.,  
Ogden
- 19 – FAA Bldg  
2150 W. Sixth St – N Intl. Arprt., SLC
- 20 – Fed Office Bldg  
125 S. State St – 1<sup>st</sup> S., SLC
- 21 – Forest Serv Bldg  
507 25<sup>th</sup> – 504 24<sup>th</sup> – Adams St., Ogden
- 22 – Job Corps Cons Str (#323)  
Mil Springs – Weber Basin Ogden
- 23 – Frank E. Moss Courthouse  
350 S. Main St., SLC
- 24 – Utah Defense Depot  
Ogden

**Employment at Federal Facility** (see valid Federal Facilities/Codes on right side of form)  
Employed at Federal Facility on list:  Yes  No  
Federal Facility Name/Code: \_\_\_\_\_

**Employed by contractor at Federal Facility on list (Hill Air Force Base, IRS)**  
Contractor Name: \_\_\_\_\_  
Hours per day at facility: \_\_\_\_\_

Mother Military/Federal Employment Information	Federal Facilities/Codes
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**Military**  
Active duty in Military:  Yes  No Date Activated: \_\_\_\_\_  
Military:  U.S. Military  Non U.S. Military Non U.S. Military Country: \_\_\_\_\_  
Branch:  Air Force  Air Force Reserve  Army  Army National Guard  Army Reserve  Coast Guard  Coast Guard Reserve  
 Marine Corps  Marine Corps Reserve  Navy  Navy Reserve Other \_\_\_\_\_  
Rank: \_\_\_\_\_ Unit: \_\_\_\_\_

- 10 – Fort Douglas  
Salt Lake City
- 11 – NG Facility  
Camp Williams, Lehi
- 12 – Tooele Army Depot  
Tooele
- 13 – VA Hosp  
500 Foothill Dr – Ft Douglas Sta., SLC
- 15 – IRS  
1160 West 1200 South, Ogden
- 16 – Alliant Tech  
Bacchus Works Magna – Plant 81
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Employed at Federal Facility on list:  Yes  No  
Federal Facility Name/Code: \_\_\_\_\_

**Employed by contractor at Federal Facility on list (Hill Air Force Base, IRS)**  
Contractor Name: \_\_\_\_\_  
Hours per day at facility: \_\_\_\_\_

Other Military/Federal Employment Information	Federal Facilities/Codes
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**Military**  
Active duty in Military:  Yes  No Date Activated: \_\_\_\_\_  
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Branch:  Air Force  Air Force Reserve  Army  Army National Guard  Army Reserve  Coast Guard  Coast Guard Reserve  
 Marine Corps  Marine Corps Reserve  Navy  Navy Reserve Other \_\_\_\_\_  
Rank: \_\_\_\_\_ Unit: \_\_\_\_\_

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Employed at Federal Facility on list:  Yes  No  
Federal Facility Name/Code: \_\_\_\_\_

**Employed by contractor at Federal Facility on list (Hill Air Force Base, IRS)**  
Contractor Name: \_\_\_\_\_  
Hours per day at facility: \_\_\_\_\_

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

If translation services are needed, please check the box and indicate the language.  
Please provide the service  Language: \_\_\_\_\_