



ESL/ELL Summer School Emergency Form

REQUIRED– This form must be submitted to Novi Community Education at time of registration at 25745 Taft Road, Novi, MI, 48374

Student Name (last, first): _____ Birthdate: _____
Preferred Name (if any): _____ Grade (2019-20): _____ Sex: _____ Age: _____
Address: _____ City: _____ Zip: _____
Home Phone: _____ Primary Language: _____

English Level of Proficiency (from classroom or ESL teacher)

- _____ Entering Level (Basic)
- _____ Emerging Level (Low Intermediate)
- _____ Developing Level (High Intermediate)
- _____ Expanding Level (Proficient)

English Reading Level: _____

Does the student speak any additional languages?

How long has student been in the United States?

Parent/Guardian Name (last, first):

Phone: _____
Email: _____
Primary Language: _____

Parent/Guardian Name (last, first):

Phone: _____
Email: _____
Primary Language: _____

Emergency Contact

Please list information of a local area contact who has agreed to assume temporary care of your child in case of an emergency.

Emergency Contact Name (last, first): _____
Address: _____ City: _____ Zip: _____
Phone number: _____ Relationship to child: _____

Please list any medical conditions, allergies, concerns, medications, etc., Novi Schools needs to be aware of:

