DARE COUNTY SCHOOLS

Student Demographic Information Update Form

School Name: _____ Grade Level: _____

Student Name: _____
First *Middle* *Last*

_____
Preferred

Parent / Guardian Name:_____

Mailing Address: _____
Any change of physical address must meet the qualifications outlined in DCS BOE Policy 4120. See ***Instructions for Proof of Domicile***

Parent/Guardian #1 Name: _____

Home #: _____Work #: _____Cell #: _____

Email: _____

Parent/Guardian #2 Name: _____

Home #: _____Work #: _____Cell #: _____

Email: _____

Emergency Contact

Name: _____ Phone: _____
Name: _____ Phone: _____

I authorize Dare County Schools to update this student's demographic information in the Student Information System.

Parent / Guardian Name: _____

Parent / Guardian Signature: _____

Date: _____