



Gwinnett County Public Schools

International  
Newcomer  
Center

## FAMILY INFORMATION FORM

Student's first name: \_\_\_\_\_ Middle name: \_\_\_\_\_ Last name(s) \_\_\_\_\_

Birth date: \_\_\_\_\_ Country of birth: \_\_\_\_\_

Language(s) spoken by student: \_\_\_\_\_

Parent/guardian: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Parent/guardian language(s): \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell number: \_\_\_\_\_

Email address: \_\_\_\_\_

Home address: \_\_\_\_\_

School student will attend (if known): \_\_\_\_\_

Last grade finished: \_\_\_\_\_ Last date student attended school: \_\_\_\_\_

Location of last school (country) : \_\_\_\_\_ Date of US entry: \_\_\_\_\_

Has the student previously attended Gwinnett County Public Schools? YES NO

Has the student previously attended school in Georgia (other than Gwinnett County Public Schools)? YES NO

Has the student previously attended school in the United States (outside the state of Georgia)? YES NO

If YES, what state? \_\_\_\_\_