

Parents: Please complete this form for all K-6 students. Please do not fold.

THOMPSON FALLS ELEMENTARY
206 Haley Avenue W.
Thompson Falls, MT 59873
(406) 827-3592

School Use Only
Date Enrolled:
Date Entered
Teacher

Student Legal Name:

1. Last First Middle Grade Birthdate Age M/F
2.
3.
4.

My child(ren) want to go by the following name or nickname:

Child 1: Child 2: Child 3: Child 4:

Mailing Address: E-mail address:

Home Location: Home Phone: (Unlisted number necessary for emergency)

Father's Name: Employer: Phone No:

Mother's Name: Employer: Phone No:

Student(s) live with: Mother & Father Mother Father Mother & Step-Father Father & Step-Mother Other

How will student(s) arrive and depart school on a daily basis? Walk Private Vehicle Bus Route #

Has this child(ren) ever been home-schooled? If so, when?

School last attended: School Phone Number:

Address: Street City State Zip

Has your child(ren) ever received or is (s)he currently receiving any of the following services?.

Speech / Language Yes No Names Special Ed Yes No
Title I Yes No Names What subjects?

Special medical information (refer to by first name):

Is your child(ren) currently taking medication? Yes No If yes, name(s)

Does your child(ren) wear glasses? Yes No Name (s):

Family Doctor: Phone No.:

If any phone numbers and/or contact information change, it is very important that the school be notified immediately!

In an emergency, call: Name of person other than home - relationship Phone No:

Phone No:

Do you have any beliefs that may restrict any school activities? Yes No If yes, please describe on back.

What is the first language learned by the student? English Other (specify)

What language(s) does the student currently use in the home? English Other (specify)

Is this student participating in a student exchange program? Yes No

When did the student first attend a school in the United States (if known)? Month / Year

Communication plays a very important part in educational success. Our school uses a variety of ways to communicate. Please mark all methods that work for you: Phone Text Message Email at Preferred Email Address

Enrolled by:

Signature of Parent or Guardian

Date