

STUDENTS NEW TO DENISON COMMUNITY HIGH SCHOOL

Student's Name: _____ Grade: _____
(last name) (first name) (middle name)

Address: _____ Phone (home): _____

(city) (state) (zip)

Sex: _____ Male _____ Female Birthdate: _____
Student No.: _____
Locker No.: _____

Father's Name: _____

Address: _____ Phone (home): _____

Workplace: _____ Phone (work): _____

Mother's Name: _____

Address: _____ Phone (home): _____

Workplace: _____ Phone (work): _____

Guardian's Name: _____

Address: _____ Phone (home): _____

Workplace: _____ Phone (work): _____

Emergency Name: (person to contact if parents/guardian cannot be located)

_____ Phone: _____

Last school attended and **Address:**

_____ (city) (state) (zip)