

**FLANAGAN-CORNELL UNIT DISTRICT #74 SCHOOLS
ENROLLMENT/EMERGENCY CARD**

FOR OFFICE USE ONLY

SID # _____

Withdrawal Date _____

Enrollment Date _____

Grade Level (circle one) ECE PK K 1 2 3 4 5 6 7 8 9 10 11 12

STUDENT _____ Male ___ Female ___
Last Name First Name Full Middle Name

Date of Birth _____ City/State of Birth _____

Address _____ City _____ Zip Code _____
Street Address P.O. Box #

Home Phone _____ Social Security # _____ Medicaid # _____ Native Language _____

Ethnic (*for state purposes only*) Caucasian (white) _____ American Indian/Alaskan Native _____ Asian/ Pacific Islander _____
Black/African American _____ Hispanic _____ Multiracial/Ethnic _____

Father/Guardian Name _____ Address _____ City _____ State ___ Zip _____
Street Address P.O. Box #

Home Phone _____ Cell Phone _____ Work Phone _____ Ext. _____ Employer _____

Email Address _____ Child lives with (check one): Both parents ___ Father ___ Mother ___

Mother/Guardian Name _____ Address _____ City _____ State ___ Zip _____
Street Address P.O. Box #

Home Phone _____ Cell Phone _____ Work Phone _____ Ext. _____ Employer _____

Email Address _____ Mother's Maiden Name (*for state purposes only*) _____

Brother/Sisters (First and Last Names)

Name _____ Date of Birth _____ Grade Level _____

Name _____ Date of Birth _____ Grade Level _____

Name _____ Date of Birth _____ Grade Level _____

Name _____ Date of Birth _____ Grade Level _____

In case of Emergency, Contact: (Person who is authorized to pick up child other than parent/guardian)

Name _____ Relationship _____ Daytime Phone _____ Cell Phone _____

Name _____ Relationship _____ Daytime Phone _____ Cell Phone _____

Name _____ Relationship _____ Daytime Phone _____ Cell Phone _____

Name _____ Relationship _____ Daytime Phone _____ Cell Phone _____

Medical Concerns: Allergies (please list) _____

Diabetic? Yes No Heart Disease? Yes No Asthma? Yes No Other Medical Concerns? (please list) _____

What action is necessary?

Family Doctor _____
Name City Phone

Signature of Parent/Guardian _____ **Date** _____