

## Mason School District Student Personal Data

### RACE

1. American Indian/Alaskan\_\_\_\_ MALE\_\_\_\_
2. Asian\_\_\_\_
3. Hispanic\_\_\_\_ FEMALE\_\_\_\_
4. Black (non-Hispanic) \_\_\_\_
5. White (non-Hispanic) \_\_\_\_

Pupil's Name: \_\_\_\_\_  
Last
First
Middle Name

Address: \_\_\_\_\_  
Street
Town
State
Zip Code

Mailing Address: \_\_\_\_\_  
 (if different) Street/PO Box
Town
State
Zip Code

Telephone # \_\_\_\_\_ Cell Phone# \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
Home
Mom
Dad

Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_  
Town
State

### FAMILY INFORMATION:

FATHER: \_\_\_\_\_  
Name
Birthplace
Work name, address & phone #

MOTHER: \_\_\_\_\_  
Name
Birthplace
Work name, address & phone #

CHILD LIVING WITH: \_\_\_\_\_ Languages Spoken in Home: \_\_\_\_\_  
Name & Relationship

SIBLING'S NAME	Birthdate	SIBLINGS NAME	Birthdate	SIBLING'S NAME	Birthdate
1. _____	_____	2. _____	_____	3. _____	_____
4. _____	_____	5. _____	_____	6. _____	_____

### EMERGENCY INFORMATION:

CONTACT \_\_\_\_\_ TELEPHONE/CELLPHONE # \_\_\_\_\_

DOCTOR \_\_\_\_\_ DOCTOR'S PHONE # \_\_\_\_\_

SPECIAL MEDICAL PROBLEMS \_\_\_\_\_

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