



STUDENT PROFILE

DATE _____

HOW CAN I HELP YOUR CHILD? WHAT DOES S/HE NEED?

STUDENT'S NAME _____ GRADE _____

D. O. B. _____ AGE _____ CITIZEN OF _____

HOME ADDRESS _____ STUDENT TEL _____

CITY _____ STATE/COUNTRY _____ ZIP _____

HOME TEL _____ FAX _____ E-MAIL _____

SCHOOL NOW ATTENDING _____

FATHER _____ E-MAIL _____

WORK TEL _____ MOBILE _____ FAX _____

MOTHER _____ E-MAIL _____

WORK TEL _____ MOBILE _____ FAX _____

STEPPARENT _____ E-MAIL _____

WORK TEL _____ MOBILE _____ FAX _____

STUDENT LIVES WITH _____ WHO HAS CUSTODY _____

NAME & AGES OF BROTHERS AND SISTERS (indicate if they are stepbrother or stepsister)

NAME	AGE	SCHOOL ATTENDING	GRADE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____