

2014-2015 JCCGW Preschool Family Situation Form

In order that we may best serve your child and family, as well as tend to any legal responsibilities, please complete this form in full, **only if applicable**. Fill in every blank and return the form along with completed emergency cards. If both parents reside at the same address you may discard this form.

Child's First Name	Child's Last Name	
Address		
City	State	Zip Code
Primary Phone		
Parent 1 Full Name		
Address		
City	State	Zip Code
Email Address	Primary Phone	
Parent 2 Full Name		
Address		
City	State	Zip Code
Email Address	Primary Phone	
Please Complete the Fo	ollowing Questions:	
Parental Status Single Married Separated Divorced Widowed	Does one parent have custody? No Yes If Yes, Mother? Father? Who is/are the legal guardian(s)?	Is a parent NOT permitted to pick up the child at school? No Yes Legal documentation is required for us to comply. Who may NOT pick up the child?
If other than parent, name	e the person with whom the child liv	ves:
Please include other information family situation.	rmation that may be helpful to the s	school regarding your child and the
Signatures of both pare	ents and/or guardians are requir	ed:
- J <u></u> pw.		
Parent/Guardian Signature		Date
Parent/Guardian Signature		Date

