

2016-2017 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	Child's Last Name	
Address			
City	State	Zip Code	
Primary Phone			
D 445 UN			
Parent 1 Full Name Address			
City	State	Zip Code	
Email Address	Primary Phone	Zip Code	
Littali Address	1 filliary i fione		
Parent 2 Full Name			
Address			
City	State	Zip Code	
Email Address	Primary Phone		
Please Complete the Fo	llowing Questions:		
Parental Status	Does one parent have custody?	Is a parent NOT permitted to pick up the	
Single	□No □Yes	child at school?	
☐Married		□No □Yes	
☐Separated	If Yes,	Legal documentation is required for us to	
□Divorced	☐Mother?	comply.	
□Widowed	☐Father?	Who may NOT pick up the child?	
	Who is/are the legal guardian(s)?		
If other than parent, name	the person with whom the child lives:		
Please include other inform	nation that may be helpful to the scho	ol regarding your child and the family	
situation.	nation that may be helpful to the sone	orregarding your oring and the family	
Signatures of both pare	nts and/or guardians are required:		
- 5			
Parent/Guardian Signature		Date	
Parent/Guardian Signature		Date	

