



# STUDENT EMERGENCY CONTACT FORM

Student \_\_\_\_\_ Grade \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Address City State ZIP

Birthdate \_\_\_\_\_ School Name \_\_\_\_\_

DO YOU HAVE INTERNET ACCESS? Yes \_\_\_ No \_\_\_

(Parents and students with access to the Internet are strongly encouraged to use their Parent Portal and Student Portal Accounts to view student grades, report cards, schedules, attendance, assignments, etc.)

## EMERGENCY CONTACTS

Parents/legal guardians should be listed as #1 and #2 below. They will be the first to be contacted in the event of an Emergency. All additional Emergency Contacts must be 18 years or older. If someone other than a parent is picking up your student from school, we must hear from a parent/ legal guardian as to who that person will be before they will be permitted to leave. **IMPORTANT** – Please see the box below regarding **Step-Parents**.

#1 \_\_\_\_\_  
(Adult Name)  
Relationship to Student \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

#2 \_\_\_\_\_  
(Adult Name)  
Relationship to Student \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

#3 \_\_\_\_\_  
(Adult Name)  
Relationship to Student \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

#4 \_\_\_\_\_  
(Adult Name)  
Relationship to Student \_\_\_\_\_  
HOME PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_  
WORK PHONE \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_

**IMPORTANT NOTE: If there are any legal Custodial issues, Orders of Protection and/or Restraining Orders that affect your student(s), a legal document must be supplied in order to be enforced. Please attach.**

**REGARDING STEP-PARENTS** - We need signed authorization from a legal parent to release school information to a Step-parent. If the Step-parent in this household has the legal parent's authorization to attend Parent Conferences, meet with the student's teachers/staff, have access to the student's information via Parent Portal, make calls regarding attendance, or remove the student from school due to illness or injury, etc. - Please sign below.

\_\_\_\_\_  
Step Parent Name

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Legal Parent/Guardian Signature