Portsmouth School District Student Enrollment Form
Emergency Contacts School Year 2017 - 2018

(PLEASE FILL OUT THIS FORM FOR EACH STUDENT BEING ENROLLED)

Last Name: _____ First Name: _____ **Grade Level:** _____
Middle Name: _____ Birth Date: _____

ENROLLMENT HISTORY

Name, address and telephone number of most recent school: _____

_____

Has this student ever attended Portsmouth Schools? ❒ Yes ❒ No If yes, what school and year? _____

Has this student ever attended school in New Hampshire before? ❒ Yes ❒ No If yes, where? _____

IN T HE EVENT OF AN UNSCHEDULED EARLY RELEASE OF PORTSMOUTH SCHOOLS:

❒ *My child will go home.*

❒ *My child will go to Child Care Provider (name):*_____*Phone* _____

❒ *My child will be picked up by (name):* _____

❒ *My child will go to his/her friend/neighbor's home (name):*_____*Phone* _____

Please Note: If the Superintendent decides to close school early due to weather conditions or other incident, public announcements will be posted on local radio and TV stations. In preparation for unscheduled early release, we need updated information regarding each student's early release plans. Please discuss these arrangements with your child and neighbors.

IN EVENT OF EMERGENCY OR SUDDEN ILLNESS AND PARENT CANNOT BE REACHED, PLEASE CONTACT:

EMERGENCY CONTACT 1

Name _____ Relationship to student _____ Home Phone _____ Work Phone _____ Cell Phone _____ Pager _____

EMERGENCY CONTACT 2

Name _____ Relationship to student _____ Home Phone _____ Work Phone _____ Cell Phone _____ Pager _____

EMERGENCY CONTACT 3

Name _____ Relationship to student _____
Home Phone _____ Work Phone _____
Cell Phone _____ Pager _____

PERMISSIONS AND ADDITIONAL INFORMATION

I give permission for my child to go on supervised field trips. (*Parent/guardian will be previously notified.*) ❒ Yes ❒ No

Does your child ride a bus to school? ❒ Yes ❒ No

Parent/Guardian Signature:_____Relationship: _____Date: _____

----------*BELOW FOR OFFICE USE ONLY* ----------

Date Entered: _____

REQUIRED FORMS:

❒ Copy of Birth Certificate

❒ Current Immunizations Records

❒ Certification of Residency

ADDITIONAL FORMS:

❒ Request for Records ❒ AUP

❒ Bus Student Agreement ❒ SS/IEP

Revised 1/05/17