

Ruckersville Elementary School

(Parents, Please help us to Update of School Records by filling out the following information and returning it to school to your child's homeroom teacher.)

Teacher _____ **Grade** _____

Child's Name _____ **Date of Birth** _____

Street Address _____

Miles from School _____ **Route#** _____ **Bus#** _____

Home Phone # _____

Home Status: Father Living _____ **Mother Living** _____

Parents: Living Together _____ **Separated** _____ **Remarried** _____
Divorced _____

Child Lives With: Mother _____ **Father** _____ **Both** _____
Other _____ **Please Explain** _____

Father's Name _____

Father's Occupation _____

Father's Employed By: _____

Father's Work # _____

Father Cell# _____

Mother's Name _____

Mother's Occupation _____

Mother's Employed By: _____

Mother's Work # _____

Mother's Cell# _____

If Parents Cannot Be Reached, Call (Name) _____

Phone # _____

E-911 Address if Different from Mailing Address (Street address, City, Zip Code)

Date _____