Two Rivers School District

Phone: (833)272-8773   Two Rivers High School Enrollment Form   Fax: (833)272-3149

GENERAL STUDENT INFORMATION

FIRST NAME:	MIDDLE NAME:	LAST NAME:

Birthdate:_____   Gender: Female   Male

Nickname:_____   Grade:_____

Language Spoken At Home:_____   Student Email Address:_____

Student Physical/911 Address	Student Mailing Address
	☐ Mailing Address is same as Physical/911 Address
Address:_____	Address:_____
City:_____	City:_____
State:_____ Zip Code:_____	State:_____ Zip Code:_____

Student Home Phone:_____   Student Cell Phone:_____

PARENT/GUARDIAN CONTACT INFORMATION

Parent/Guardian 1	Parent/Guardian 2
Name:_____	Name:_____
Relationship to Student:_____	Relationship to Student:_____
Language of Correspondence:_____	Language of Correspondence:_____
Mailing Address:_____	Mailing Address:_____
City:_____	City:_____
State:_____ Zip Code:_____	State:_____ Zip Code:_____
Email:_____	Email:_____
Home Phone:_____ Cell Phone:_____	Home Phone:_____ Cell Phone:_____
Work Phone:_____ *Alert Phone:_____	Work Phone:_____ *Alert Phone:_____
*Alert Phone is used by the district's automated phone message system.	*Alert Phone is used by the district's automated phone message system.
Employer:_____	Employer:_____
☐ Student Primarily Resides with this Guardian.	☐ Student Primarily Resides with this Guardian.

Emergency Information

Emergency Contact Information (Contacts Other Than Guardians to be Called in Case of an Emergency)

Contact Order	Name	Relationship to Child	Phone #	Phone Type (ex: Home, Cell, Work)
1				
2				
3				
4				
5				

Physician:_____   Physician:_____

Physician Phone:_____   Physician Phone:_____

Please list any medical concerns and/or medications for this child:_____

Last School Attended:_____   Phone #:_____

Address:_____

Has this child been expelled from school in any other school district or is the child a party to an expulsion proceeding?   Yes   No

Has this child been retained?   Yes   No

Has this child met the requirements of the Arkansas State Health laws necessary to enter school?   Yes   No

Please list the names of anyone who IS ALLOWED to check out/pick up this child from school: _____