S.S no: \_\_\_\_\_\_\_\_\_\_ Index: \_\_\_\_\_\_\_\_\_\_ Class: \_\_\_\_\_\_\_ Enrolment date: \_\_\_\_\_\_\_\_\_\_\_

Transferred date: \_\_\_\_\_\_\_\_\_ Graduated: \_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Students Information** | **Health Information** |
| Last name:\_\_\_\_\_\_\_\_ First name:\_\_\_\_\_\_\_\_\_ Middle name:\_\_\_\_\_\_\_\_  Date of birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_ age \_\_\_\_\_yrs.  D M Y  Place of birth:\_\_\_\_\_\_\_\_\_\_ Gender: male/ Female  Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Check all that apply  asthma seizure heart disease  diabetes diet restriction other  Comments:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Last School Attended** | **Special Education** |
| Name of school date last attended Class District  \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_  Reason for transfer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Check all that apply  speech problem  hearing problem  visually  autistic  physical handicap  other |
| **Family Information ( fill in the answer)** | **Past Behavioural Problems** |
| Father’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job:\_\_\_\_\_\_\_\_\_\_\_  Stepfather/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Mother’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job:\_\_\_\_\_\_\_\_\_\_\_  Stepmother/ Guardian:\_\_\_\_\_\_\_\_\_\_\_\_  Emergency Contact person:\_\_\_\_\_\_\_\_\_\_\_\_\_ cell:\_\_\_\_\_\_\_\_\_\_  Number of sibling:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | My child was not expelled  My child was expelled  My child is aggressive  My child is a bully ( gossip, tease other)  My child disrupts the class  My child is argumentative/talk back |
| **Ethnic Origin : Select one** | **Parent’s Educational background** |
| Creole Hispanic Garifuna Chinese East Indian  Students’ first language:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Language spoken at home:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent’s Origin:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No schooling  Only primary education  high school  university |

Parent signature certifies that the above information is correct