



**Family Information:**

Parent/Legal Guardian Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Home Address: \_\_\_\_\_  
                            Number           Street   Apt Number           City   State           Zip

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Second Parent/Guardian Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Home Address: \_\_\_\_\_ (if different)

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Family Information: Siblings**

List the siblings name(s) with current 2010-2011 school and grade:

1) \_\_\_\_\_  Applying to XSE  Currently Enrolled  
    Sibling Name           Current School           Grade

2) \_\_\_\_\_  Applying to XSE  Currently Enrolled  
    Sibling Name           Current School           Grade

3) \_\_\_\_\_  Applying to XSE  Currently Enrolled  
    Sibling Name           Current School           Grade

**Race/Ethnicity: please check mark**

American Indian or Alaskan Native (1)   
Black (2)   
White (5)

Asian or Pacific Islander (3)   
Hispanic (4)   
Multi-Racial (6)

Is your child presently receiving any of the following services?

Title 1       Special Education/IEP    Speech/IEP    Free/Reduced Lunch