



Instructions: Please print using a black ballpoint pen, complete all pages and date the last page. Notify your school immediately if any of your information changes. If you need help filling out this form, please contact your school.

STUDENT INFORMATION

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Descriptions	Questions
<p>Communication Preferences This question helps the school provide an interpreter or translated documents, free of charge, should you want them.</p> <p>This section is for informational purposes only. It is not used to identify your child for English language proficiency placement testing.</p>	<p>1. What language(s) would you prefer the school use to communicate with you?</p> <hr/> <hr/>

Eligibility for Language Development Support
This section helps the school identify if your child should be assessed to receive support in acadupuv____df

STUDENT INFORMATION (CONTINUED)

ASIAN: • Asian Indian • Burmese • Cambodian • Chinese • Filipino • Hmong •

EMERGENCY CONTACTS

In an emergency, the parent/guardian listed in #3 will be called first, the Parent/guardian listed in #5 will be called second. By listing a name or names in this section as an emergency contact, you are authorizing another person or people to pick up your student at school if you cannot be reached.

69. Relationship To Student _____ 70. First & Last Name _____

71. Primary Phone No. _____ 2. Other Phone No. _____

73. Email: _____

74. Relationship To Student _____ 75. First & Last Name _____

76. Primary Phone No. _____ 7. Other Phone No. _____

78. Email: _____

79. Relationship To Student _____ 80. First & Last Name _____

81. Primary Phone No. _____ 2. Other Phone No. _____

83. Email: _____

Please also list an emergency contact who lives at least 100 miles away, for use in a natural disaster when local phone lines are not available.

84. First & Last Name _____ 5. Primary Phone No. _____

Choose only ONE If there is an emergency school closure which requires that students are released early, which one of these plans should your student follow? Our student will...

- Leave school and go to home, daycare provider or neighbor as usual
- Be picked up by parent or other authorized contact
- Go to the home of a designated friend or neighbor

SIBLINGS

Please list student's sibling(s) currently attending a Portland Public Schools school.

STUDENT MEDICAL INFORMATION

School staff need to know if your student has a medical condition for which they may require assistance during school day. Remember to advise the school of any changes in information.

101. Doctor's Name (optional) _____ 2. Phone No. (optional) _____
103. Preferred Hospital _____ ~~Completed~~ Emergency Medical Services (EMS) makes the final decision for site of best available care when serious illness, accident or other emergency event directs need for transporting to a hospital. If possible, the school will advise EMS of your hospital preference.
104. Insurance Carrier (optional) _____ Health Care Reform creates access to medical insurance for everyone at no cost or tax credits to help pay for health care coverage. If you would like help accessing health coverage, please check the box so we can contact you.
105. Dentist's Name (optional) _____ 6. Phone No. (optional) _____
107. Please check any current medical conditions:
- Serious Allergies _____ Life Threatening? Yes • No
 - Asthma
 - Heart Disease
 - Seizure Disorder
 - Diabetes: • Type I • Type II
108. Other special health needs at school _____
109. Medications to be taken at school (please list and also complete the Authorization for Medication form)
- _____
- _____
- _____

PROGRAM INFORMATION

110. Does your student have a current Individualized Education Plan (IEP)? Yes • No
111. Does your student have a current Section 504 Plan? Yes • No
112. Is your student in a Talented and Gifted (TAG) program? Yes • No
113. Is your student in or has your student been in an English as a Second Language program? Yes? No
114. Is your student in or has your student been in a Dual Language Immersion program? Yes • No
115. Is your student pregnant and/or parenting? Yes • No

FEDERAL TITLE PROGRAM QUESTIONS

(NOTE TO SCHOOL STAFF: Family checks "Yes" for #116 please fax this page to (503) 92628; if "Yes" for #117 and #118 please fax this page to (503) 93611.)

Oregon Title IC Migrant Education Program—This program helps children and young adults aged 21 who move frequently (on their own or with their parents) in order to seek or obtain temporary or seasonal work in agriculture, forestry and/or fishing activities.

117. A person in my family has worked in, or has planned to work in, agriculture, forestry and/or fishing. This can include work on farms, ranches, canneries, nurseries, trees or fishing. **Yes • No**

McKinney-Vento Program—This program guarantees that students, no matter their living situation, have access to public education, including transportation to and from school. A school district representative will be in touch if you check a box.

118. Please place a check in the appropriate box if it **applies**

- You are staying in a motel, car or campsite until you can find affordable housing.
- Student is not living with or being supported by their parent or guardian. Student living on their own or may be staying temporarily with someone else.
- You are staying temporarily with another family due to loss of your own housing or economic hardship.
- You are living in a shelter, transitional housing program or moving from place to place without permanent housing.
- Your housing is substandard: for example, the utilities are off, there is severe mold, it is extremely overcrowded or it is a space not meant for human habitation.

PERMISSIONS/AUTHORIZATIONS

For annual notices on Directory Information, Student Records, Military Recruiting and Protection of Student Rights, please see the District Parent and Student Handbook.

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*Under federal law and school policy, the school district may release the following information without prior

