

- English  
 Español



uplifteducation

Date: \_\_\_\_\_

School: \_\_\_\_\_

## Student Information Update Form

### Student Information: / Información sobre el estudiante:

Student Name: \_\_\_\_\_ , \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre Middle Initial/ Segundo Nombre

Date of Birth:/ Fecha de Nacimiento: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade:/ Grado: \_\_\_\_\_

**Complete ONLY the information that has changed. DO NOT fill out any information that has not changed  
SOLO llene la información que ha cambiando. NO llene la información si no ha cambiado**

Student Home/Mailing Address: /Domicilio: \_\_\_\_\_

City/ Ciudad: \_\_\_\_\_ State/Estado: \_\_\_\_\_ Zip Code:/ Código Postal \_\_\_\_\_

Student Home Phone:/ Teléfono de Casa: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### **Guardian/ Parent Contact information: / Informacion de Padre/ Guardian:**

1. Parent Name: \_\_\_\_\_ , \_\_\_\_\_ Relationship \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Home Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Cell Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Work Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_

2. Parent Name: \_\_\_\_\_ , \_\_\_\_\_ Relationship \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Home Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Cell Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_

Work Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_

**Emergency contacts if the people above can not be reached ( In order of who to contact first):  
Contactos de emergencia por si no contestan los Padres o Guardianes (En orden de quien contactar primero)**

Contact Name 1: \_\_\_\_\_ , \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Phone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ (Select type:/ Seleccione el tipo: Home Cell Work)

Contact Name 2: \_\_\_\_\_ , \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Phone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ (Select type:/ Seleccione el tipo: Home Cell Work)

Contact Name 3: \_\_\_\_\_ , \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Phone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ (Select type:/ Seleccione el tipo: Home Cell Work)

Please remove the following emergency contacts: 1. \_\_\_\_\_

2. \_\_\_\_\_ 3. \_\_\_\_\_



## Student Information Update Form

**People that are authorized to transport my child (children) from school that are not previously listed (limit of 3)**  
**Personas autorizadas para transportar a mi hijo/a de la escuela que todavía no están en la lista (límite del 3)**

Contact Name 1: \_\_\_\_\_, \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Phone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ (Select type:/ Seleccione el tipo: Home Cell Work)

Contact Name 2: \_\_\_\_\_, \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Phone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ (Select type:/ Seleccione el tipo: Home Cell Work)

Contact Name 3: \_\_\_\_\_, \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last name/ Apellido First Name/ Primer Nombre

Phone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ (Select type:/ Seleccione el tipo: Home Cell Work)

Other Important information: / Otra información importante:

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**These changes also apply to the following siblings: Print Name and Grade**  
**Estos cambios también aplican a los siguientes estudiantes: Deletree el nombre y el grado**

\_\_\_\_\_  
Last Name, First Name Middle (\_\_\_\_) Grade \_\_\_\_\_ Last Name, First Name Middle (\_\_\_\_) Grade

\_\_\_\_\_  
Last Name, First Name Middle (\_\_\_\_) Grade \_\_\_\_\_ Last Name, First Name Middle (\_\_\_\_) Grade

\_\_\_\_\_  
Last Name, First Name Middle (\_\_\_\_) Grade \_\_\_\_\_ Last Name, First Name Middle (\_\_\_\_) Grade

Parent Signature \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only:**

\_\_\_\_ ID Provided

\_\_\_\_ Date Form Received

\_\_\_\_ Date Request Completed

By: \_\_\_\_\_

By: \_\_\_\_\_