THE INFORMATION REQUESTED ON THIS FORM IS USED FOR OFFICIAL SCHOOL PURPOSES AS REQUIRED BY LAW AND TO AID THE SCHOOL IN THIS OPERATION AND FUTURE PLANNING.



South Washington County Schools • District 833

ADDRESS INFORMATION / PARENT PORTAL ACCESS

• All persons residing at this address must be listed below •

School starting date _____

Name of last School District attended _____

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Middle

Father / Step-Father:

Mother / Step-Mother:

Other (Specify):	Middle			DOD	_					
Legal Guardian / Foster Parent:	Middle	Last		DOB	Is there a p	arent not	living at this a	addres	s who	should receive an extr
ADDRESS					_ mailing?		J			
APT / UNIT					_ Yes	☐ No	If yes, ii	nclude d	ther pa	rent information below.
CITY	_ STATE	ZIP			Name	Middlo	Relationship			
PHONE	_						LdSt			
Date you did/will move to this address	o this address:/ Phone									
List names of all children (birth lift more than one family resides a	- 21 years) re	esiding at	this ad	dress,	including thos	se you are	currently enr			
Parent Name	Child Name:	•				Sex	Birth Date	Grade	Ethnic Code	
				FTHNI	CCODE		CION LIEBE	for D	ADEN	T DODTAL
Lease or Purchase Agreement is required upon request			01 American Indian or Alaskan			SIGN HERE for PARENT PORTAL access: Signature: Currently have Parent Portal access				
Your current phone # (if different than above):			02 Asian or Native Hawaiian or							
Your current address (if different than above):				Single Family Login						
					cific Islander		□ Separate Pa			
Have you lived in this School District previously?			03 His	panic/Latino	Email address: (if not on enrollment form)					
If yes, at what address:			04 Bla	ck or African Am	erican	List both email addresses for separate logins.				
Do you or will you rent your home?				05 Wh	ite		Email:			
If yes, please list owner's name:						Email:				
										DIST-9252(08/16)