

**Office Use ONLY:**  
Date Enrolled: \_\_\_\_\_  
I.D. #: \_\_\_\_\_



# COLLEYVILLE HERITAGE HIGH SCHOOL STUDENT INFORMATION SHEET

**Instructions:** Please fill out the information sheet completely.

Student's name: \_\_\_\_\_  
Last First M.I.

Grade: \_\_\_\_\_

Address: \_\_\_\_\_ Phone#: (\_\_\_\_\_) \_\_\_\_\_  
Unlisted: Yes or No

\_\_\_\_\_  
City Zip Code

Emergency #: (\_\_\_\_\_) \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_

Place of Birth: \_\_\_\_\_

Legal Guardian: \_\_\_\_\_  
Last First M.I.

Name of person with whom student lives: \_\_\_\_\_  
Last First M.I.

Relation (*Circle corresponding description*)

Parent Brother Uncle Spouse  
Sister Aunt Grandparent Other \_\_\_\_\_

Previous School \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Date entered 8<sup>th</sup> grade: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Year

Have you ever received special services? **Y**                      **N**

Have you ever attended a Grapevine-Colleyville School? **Y**                      **N**      What School? \_\_\_\_\_  
When: \_\_\_\_\_