

Student Contact Information Form

Please print and fully complete BOTH SIDES of this form.

Student name: _____ Birth date: ____/____/____ Gender: F M
Last First Middle Month Day Year

Student home address: _____

City: _____ Zip: _____

Mailing address (if different from home address): _____

City: _____ Zip: _____

Is the child Hispanic or Latino? Y N What is the child's race or ethnicity?:
 American Indian/Alaska Native Asian Black/African American Native Hawaiian/Other Pacific Islander White

Are you temporarily living with others due to a lack of permanent housing, living in a shelter, living in a hotel, or otherwise homeless? Y N

Parent/Guardian Information

Parent/guardian 1 name: _____ Relationship: _____

Home phone: _____ Cell phone: _____ Preferred language: _____

Would you like to receive **text messages*** at the above cell phone number with important information from the district or school, such as school closings or upcoming events? Y N

Work phone: _____ Email: _____

Lives with student Has custody of student Has permission to pick up student Gets mailings for student Should have access to Campus Portal?

Parent/guardian 2 name: _____ Relationship: _____

Home phone: _____ Cell phone: _____ Preferred language: _____

Would you like to receive **text messages*** at the above cell phone number with important information from the district or school, such as school closings or upcoming events? Y N

Work phone: _____ Email: _____

Lives with student Has custody of student Has permission to pick up student Gets mailings for student Should have access to Campus Portal?

Emergency Contact 1

Name: _____ Relationship: _____

Home phone: _____ Cell phone: _____ Work phone: _____

E-mail: _____ Preferred language: _____

Emergency Contact 2

Name: _____ Relationship: _____

Home phone: _____ Cell phone: _____ Work phone: _____

E-mail: _____ Preferred language: _____

A change in address requires documentation. Additional contacts can be added. Please check with your school.

Parent/guardian signature

Date

**Text message charges may apply, depending on your cell phone plan. Please check with your provider.*

Opt-out of Release of Directory Information

Baltimore City Public Schools (City Schools) may disclose appropriately designated “directory information” without written consent, unless you opt out of some, or all, of its release. The Family Educational Rights and Privacy Act (FERPA), a Federal law, defines directory information as information that is generally not considered harmful or an invasion of privacy if released. City Schools designates the following as directory information: student name, address, telephone number, photographic image, participation in activities and sports, height and weight (if on an athletic team), years in attendance at City Schools, grade level, major field of study, degrees, honors and awards received, and most recent educational institution attended prior to City Schools.

Two federal laws require City Schools to provide military recruiters, upon request, with student names, addresses and telephone listings unless parents/guardians have advised City Schools that they do not want their student’s information disclosed without their prior written consent.

If you give your consent to the release of your student’s directory information as described above you DO NOT need to complete or return this form. If you do not want City Schools to disclose directory information from your child’s education records without your prior written consent, you must notify City Schools by completing and signing this opt out of release of directory information form and returning it to the named student’s school by September 30, 2016. If you do not give your consent to allow City Schools to release your student’s directory information then please check all that apply:

- In City Schools materials (e.g., playbills, team rosters, school websites, social media, etc.)
- To United States military recruiters
- To institutions of higher learning
- To any organization of parents, teachers, students or former students; businesses; agencies; governmental or political offices; or any combination of these groups
- To the media
- To anyone

Opt-out of Tobacco and Risk Behavior Survey

The Youth Tobacco and Risk Behavior Survey (YTRBS) monitors priority health-risk behaviors, including tobacco use and the prevalence of obesity and asthma among youth and young adults. The YTRBS is conducted by the Maryland Department of Health and Mental Hygiene (DHMH) and the Maryland State Department of Education (MSDE) in partnership with the Centers for Disease Control and Prevention (CDC). In addition, Baltimore City Public Schools conducts a similar survey, the Youth Risk Behavior Survey, in partnership with DHMH, MSDE, and the CDC. Please note that:

- Schools and classrooms are randomly selected to participate
- The survey is completely anonymous
- All answers are private
- Student names are not collected on the survey response sheet
- Students will not be asked to complete more than one survey

Additional information about the survey, including a copy of the survey questions, can be obtained at the DHMH website.

- As the parent/guardian of the student named on the reverse of this form, I do **not** give permission for my child to participate in the survey.

Home Language Survey

In accordance with federal and state requirements, City Schools conducts the Home Language Survey of all students to assist in identifying language minority students. The Home Language Survey provides a broad indicator of which students may require further assessment to determine eligibility for English for Speakers of Other Languages (ESOL) services.

Student’s country of birth: _____

If the student was born in a different country, when was the first time he/she attended a school in the United States? _____

What was the language your child first learned to speak?

- | | | | |
|--|--|---|---------------------------------------|
| <input type="radio"/> English | <input type="radio"/> Español (Spanish) | <input type="radio"/> नेपाली (Nepali) | <input type="radio"/> ትግርኛ (Tigrinya) |
| <input type="radio"/> Français (French) | <input type="radio"/> ڊيبرعلا (Arabic) | <input type="radio"/> kiSwahili (Swahili) | <input type="radio"/> ودر (Urdu) |
| <input type="radio"/> 普通话 / 國語 (Chinese, Mandarin) | <input type="radio"/> 粵語 / 粵語 (Chinese, Cantonese) | <input type="radio"/> Tagalog (Tagalog) | <input type="radio"/> Other: |
| <input type="radio"/> Tiếng Việt (Vietnamese) | <input type="radio"/> Wollof (Wolof) | <input type="radio"/> አማርኛ (Amharic) | _____ |

What language do you use most often at home? _____

Parent, guardian, or eligible student signature

Date

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