

**HIGHLAND JUNIOR/SENIOR HIGH SCHOOL  
General Information Form**

FULL NAME \_\_\_\_\_ GRADE \_\_\_\_\_ DATE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
(P.O. Box) (City) (Zip Code)  
PHYSICAL ADDRESS \_\_\_\_\_  
(Street Address) (City) (Zip Code)  
HOME PHONE \_\_\_\_\_ COUNTY \_\_\_\_\_  
BIRTHPLACE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
GENDER: M \_\_\_ F \_\_\_ ETHNICITY \_\_\_\_\_ HISPANIC OR LATINO? Y N  
STUDENT'S CELL NUMBER: \_\_\_\_\_ STUDENT'S EMAIL: \_\_\_\_\_  
BUS STUDENT: Y N BUS DRIVER \_\_\_\_\_  
PARENT/GUARDIAN INFORMATION: Relationship to child: Living with student?

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ Y N  
NAME \_\_\_\_\_ PHONE \_\_\_\_\_ Y N  
NAME \_\_\_\_\_ PHONE \_\_\_\_\_ Y N

PARENT/GUARDIAN EMAIL ADDRESS \_\_\_\_\_  
PARENT/GUARDIAN EMPLOYER(S) \_\_\_\_\_  
NAMES AND AGES OF SIBLINGS LIVING WITH STUDENT: \_\_\_\_\_

WHERE DOES THE STUDENT STAY AT NIGHT: /\_\_\_/ in a home you own or rent; OR /\_\_\_/ temporarily with another family in a house, mobile home, or apartment; OR /\_\_\_/ Other (please specify): \_\_\_\_\_

MILITARY CONNECTION: YES NO  
Permission to display & release to media child's photo with name attached: YES NO  
Permission to display & release to media child's name without photo (honor roll, etc.): YES NO  
Parent Preferred Method of Non-Emergency Contact via School Messenger: CELL TEXT EMAIL

May we give your child Ibuprofen? YES NO  
May we give your child Tylenol? YES NO  
May we give your child Benadryl? YES NO  
Lions Club Health Screening: YES NO  
Permission for Emergency Medical Treatment and Transportation if Necessary: YES NO  
SIGNATURE: \_\_\_\_\_

\*\*\*IN CASE OF EMERGENCY WHEN PARENTS CAN'T BE REACHED, CONTACT:  
\_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_\_\_ Phone \_\_\_\_\_

**CLASS SCHEDULE**

<b>1<sup>st</sup> Semester Classes:</b>	<b>2<sup>nd</sup> Semester Classes:</b>
1 <sup>st</sup> Period _____	1 <sup>st</sup> Period _____
2 <sup>nd</sup> Period _____	2 <sup>nd</sup> Period _____
3 <sup>rd</sup> Period _____	3 <sup>rd</sup> Period _____
4 <sup>th</sup> Period _____	4 <sup>th</sup> Period _____
5 <sup>th</sup> Period _____	5 <sup>th</sup> Period _____
6 <sup>th</sup> Period _____	6 <sup>th</sup> Period _____
7 <sup>th</sup> Period _____	7 <sup>th</sup> Period _____
Advisory _____	Advisory _____

Locker Number \_\_\_\_\_  
Your schedule and locker cannot be changed without permission.