

**Tidioute Community Charter School**  
**Child History and Emergency Contact Information**



Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Last                      First                      Middle

Nickname: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Name(s) of other children in the family: \_\_\_\_\_

Name(s) of anyone else who is regularly in the home: \_\_\_\_\_

Can the child understand basic spoken English: \_\_\_\_\_

Can the child communicate in English: \_\_\_\_\_

\_\_\_\_\_

***Persons other than the parents authorized to pick up child:***

Name	Relationship	Phone #er:
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1. _____	_____	_____
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2. _____	_____	_____
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3. _____	_____	_____
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4. _____	_____	_____
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5. _____	_____	_____
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**Parents/Guardian Signature:** \_\_\_\_\_

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