

COE-BROWN NORTHWOOD ACADEMY
Student Update 2021 – 2022

Student's Name _____
Last First Middle (full) Grade (fall 2021)

Date of Birth: _____ **Place of Birth** _____ **Gender:** _____
Month / Day / Year City and State

Student's Email _____ **Student's Phone ()** _____

Other CBNA Students: _____
(Siblings) Name Grade Name Grade

Previous School Attended: _____
School Name City State

Race/Ethnicity (check all that apply):

___ White ___ Black ___ Asian ___ Hispanic ___ American Indian/Alaskan Native

- **Does student currently receive special education services (IEP)?** ___ Yes ___ No
 - **If NO, has your student received special education services in the past (IEP)?** ___ Yes ___ No
- **Does student currently have a 504 Plan?** ___ Yes ___ No
 - **If NO, has your student *EVER* had a 504 Plan?** ___ Yes ___ No
- **Is English the primary language spoken in your home?** ___ Yes ___ No
- **What language did you learn to speak first (if other than English)?** _____

PARENT/GUARDIAN MILITARY STATUS

The following military status is applicable to my student (select all that apply):

- One or more** Parents/Guardians are serving as Active Duty in the Armed Forces
- One or more** Parents/Guardians are serving full-time in the National Guard
- NO** Parents/Guardians are serving in the Armed Forces or full-time in the National Guard
- I prefer not to disclose Military Status

CUSTODIAL INFORMATION

- Student lives with both Parents/Guardians (NO custodial paperwork exists)
- Student lives primarily with one Parent/Guardian (*Parenting Plan/Custodial Documents Required*)
- Parent/Guardians have Shared Custody (50/50) (*Parenting Plan/Custodial Documents Required*)

PRIMARY HOUSEHOLD (where student primarily resides):

Street Address: _____ Town/Zip: _____

Mailing Address (if different): _____

PARENT / GUARDIAN #1 (Residing with student)

Name: _____

Relationship to Student: _____

Email: _____

Home Phone: (_____) _____

Cell Phone: (_____) _____

Work Phone: (_____) _____

Employer: _____

PARENT / GUARDIAN #2 (Residing with student)

Name: _____

Relationship to Student: _____

Email: _____

Home Phone: (_____) _____

Cell Phone: (_____) _____

Work Phone: (_____) _____

Employer: _____

SECONDARY HOUSEHOLD (For Non-Custodial or Shared-Custody; Please attach Parenting Plan/Custodial Documents):

Mailing Address: _____ Town/Zip: _____

PARENT / GUARDIAN #1

Name: _____

Relationship to Student: _____

Email: _____

Home Phone: (_____) _____

Cell Phone: (_____) _____

Work Phone: (_____) _____

Employer: _____

PARENT / GUARDIAN #2

Name: _____

Relationship to Student: _____

Email: _____

Home Phone: (_____) _____

Cell Phone: (_____) _____

Work Phone: (_____) _____

Employer: _____

Name of Parent or Guardian we should contact in order of priority: (1) _____

(2): _____ (3): _____ (4): _____

EMERGENCY CONTACTS- list (2) additional contacts (other than parents/guardians) we can call if we are unable to reach you in an emergency:

Name: _____ Relationship: _____ Phone: (_____) _____

Name: _____ Relationship: _____ Phone: (_____) _____