## 2016-2017 Student Information Sheet

Student Name:	
After School Plans: Parent Pick	x-up Walking Bus
If they ride a bus, which bus? (If you do not know, please contact the	bus garage (772-3153) or check Skyward)
Medical Conditions/Allergies?	
Food allergies/issues?	
Is your information in Skyward correct (If not, please make corrections on Sky	
What is the best way to contact you?	Email
	Phone
	Note Home
When is the best time to contact you? _	
Is there anything else I should know ab year of learning?	out your child to help them have a successful

<sup>\*</sup>Please complete this sheet and return on Meet the Teacher Night. Thank you! \*  $\,$