

GUIDANCE INFORMATION

Student's Name: _____ Student's Date of Birth: _____

Address: _____ Grade _____

Parent Email: _____

Parent/Guardian's Name _____ Employer: _____

Home Number: _____ Work Number: _____ Cell: _____

Parent/Guardian's Name _____ Employer: _____

Home Number: _____ Work Number: _____ Cell: _____

Child lives with: (please check all that apply)

- | | | | |
|-----------------------------------|-----------------------------------|--------------------------------------|-----------------------------------|
| <input type="radio"/> mother | <input type="radio"/> father | <input type="radio"/> step-father | <input type="radio"/> step-mother |
| <input type="radio"/> grandmother | <input type="radio"/> grandfather | <input type="radio"/> foster parents | <input type="radio"/> other _____ |
| (please specify) | | | |

Please list children in household:

Name	Age	Grade (if applicable)	Relationship to Student
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If there is a custody agreement, please provide a copy for the guidance office.

Twin Valley School District is an equal opportunity education institution and will not discriminate on the basis of race, color, national origin, gender and handicap in its activities, programs or employment practices as required by Title VI, Title IX and Section 504. For information regarding civil rights or grievance procedures, contact Title IX Compliance Officer, Section 504 Coordinator, 4851 N. Twin Valley Rd., Elverson, PA 19520, telephone 610-286-8550.