

## PAULDING COUNTY SCHOOL DISTRICT Family Household Form

Note: If more than one additional address applies to student(s) within the primary household, please see Registrar for additional instructions.

☐ Check here if other household members are already registered in the district.

SECTION 1: Primary Household (Household in which students on this form reside the majority of the time)								
Primary Telephone Number	Mailing Address, if different from residential address							
Residential Address:	Mailing Address:							
Apt. Number	Apt. Number							
City State Zip Code	City State Zip Code							
Biological Parent/Guardian whom the student lives with:	Spouse of Parent/Guardian whom the student lives with:							
Legal Name:	Legal Name:							
(Last) (First) (Middle)	(Last) (First) (Middle)							
Email:	Email:							
Employer:	Employer:							
Cell Phone: Work Phone:	Cell Phone: Work Phone:							
Marital Status: ☐Married ☐Single ☐Divorced ☐Separated ☐Widow   Marital Status: ☐Married ☐Single ☐Divorced ☐Separated ☐Widow								
SECTION 2: Secondary Household if applicable ( <i>ONLY</i> applies to the biological parent whom the student does <i>NOT</i> live with								
the majority of the time.								
Biological Parent whom the student does NOT live with:	Spouse of Parent whom the student does NOT live with:							
Legal Name:	Legal Name:							
(Last) (First) (Middle)	(Last) (First) (Middle)							
Email:	Email:							
Employer:	Employer:							
Cell Phone: Work Phone:	Cell Phone: Work Phone:							
Marital Status: ☐Married ☐Single ☐Divorced ☐Separated ☐Widow	Marital Status: ☐Married ☐Single ☐Divorced ☐Separated ☐Widow							
This person is allowed to pick up student(s) from school and can be	This person is allowed to pick up student(s) from school and can be							
contacted in the event of an emergency without contacting the	contacted in the event of an emergency without contacting the							
biological parent/guardian 1 whom the student lives with.	biological parent/guardian 1 whom the student lives with.							

SECTION 3: S	SECTION 3: Student Information (Include new students enrolling and currently enrolled students)									
Please provide the names of ALL SCHOOL AGE CHILDREN that are currently attending a PCSD school and reside with the biological parent/guardian										
whom the student lives with, along with the date of birth and relationship to each Parent/Guardian (i.e., son, daughter, step-son, step-daughter,										
granddaughter, grandson, sister, brother, etc.).										
First Name	Middle Name	Last Name	DOB	Grade	Relationship to Biological Parent/ Guardian whom the student lives	Relationship to Spouse of Parent/ Guardian whom the student lives with	Relationship to Biological Parent whom the student does NOT live with	Relationship to Spouse of Biological Parent whom the student does NOT live with		
				0.0.0						
If there are custody	 v issues that prevent	any of the previously i	indicated hear	l Is of househ	lold from having acces	 is to the students listed	above, please provide	details. If such		
If there are custody issues that prevent any of the previously indicated heads of household from having access to the students listed above, please provide details. If such restrictions apply to a natural parent or legal parent/guardian, court documentation must be provided.										
SECTION 4: Additional Household Members (Please list any other adults living in the Primary Household)										
CECTION F. Francisco Contacto DO NOT INCLUDE THE DADENTIC)										
SECTION 5: Emergency Contacts: DO NOT INCLUDE THE PARENT(S).										
The following adults (MUST be 18 or older) have permission to pick up my child(ren) from school without further contact from me and in the event of an emergency when the PARENT/GUARDIAN cannot be reached: (If registering more than one student and emergency contacts differ places see										
emergency when the PARENT/GUARDIAN cannot be reached: (If registering more than one student and emergency contacts differ, please see  Registrar.) If an emergency contact has more than one phone number (e.g., home phone and cell phone), please use two different contact boxes.										
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CONTACT ONE:	7 522 2257 278 877									
CONTACT TWO:										
CONTACT THREE	:									
CONTACT FOUR:										
CONTACT FIVE:										
Printed Name of Person Completing Form (Enrolling Parent ONLY):Relationship to student:										
Enrolling Darent's	s Signature						Date:			
Enrolling Parent's Signature Date:										