



**Lower
Kuskokwim
School
District** **Demographic Information**

Student Name: _____

Mailing address: _____

Physical address: _____

Home phone number: _____

** Foster Care (Yes) (No) If in foster care or other State Custody, please complete following information with Legal Guardian information.

Mother Information:

Mother / Guardian's Name _____

Mailing address (if different than above) _____

Physical address (if different than above) _____

Home Phone _____ Cell Phone: _____

Employer: _____ Work number: _____

Active Duty: (Yes) (No) Branch: _____ Rank: _____

Father Information:

Father / Guardian's Name _____

Mailing address (if different than above) _____

Physical address (if different than above) _____

Home Phone _____ Cell Phone: _____

Employer: _____ Work number: _____

Active Duty: (Yes) (No) Branch: _____ Rank: _____

***Please contact us throughout the year if you have a change on phone, or address.**