

DANBURY PUBLIC SCHOOLS
Student Information Form
752: WOOSTER SCHOOL

Student Name (Last, First M.I.)				Resides With (Give Salutation and name(s))			Relationship (See Directions)	
Grade Level		Sex	Date of Birth	Street Address	APT	Zip Code	Bus Route	
		M F	/ /					
School Last Attended				Home Telephone	Emergency Telephone	Emergency Contact		

Use the section below only when student has need for special PICK-UP/DROP-OFF

A. M. Pickup Name:	Telephone:
Address:	
P. M. Pickup Name:	Telephone:
Address:	

Please submit this form to:
Liz Pereira
pereil@danbury.k12.ct.us

School Last Attended: (MUST FILL)
