

**INDIAN PRAIRIE SCHOOL DISTRICT #204
2018-19 KINDERGARTEN INFORMATION SHEET**

Legal Student Name _____ Gender Male or Female
(first) (middle) (last)

Current Address _____

Email _____

Subdivision _____ Phone Number (H/C) _____

Student Date of Birth _____ Phone Number (W) _____

Parent/Guardian Name _____
(first) (last)

Did your child attend District 204's Prairie Children Preschool? YES NO

Do you have other children at (school name)? List Name(s) _____

YES NO List Name(s) _____

Primary language spoken in the home _____

Health concerns, other services needed, or any additional information you wish to share:

**PLEASE RETURN THIS FORM TO THE BUILTA OFFICE
PRIOR TO ORIENTATION on March 12, 2018.**

Thank You!