Student Information & Profile (LOV/RIR)

Full Name					
Preferred Name					
Grade		Age		ate	
Address					
	Home Phone				
Who do you live with?	Both Parents	Mother	Father	Other	
Father's Name	W	Work Phone		Cell Phone	
Mother's Name		Work Phone		Cell Phone	
Number of siblings					
Do you work?	If so, where?		How many hours per week?		
What careers interest you	?				
What do you plan to do a					
Favorites:					
Foods	Sports				
Movies Books					
TV Shows			Magazines		
Pets			Hobbies		
Talent/Skill		Collections			
Acknowledgement of Sy	llabus & Classroo	m Policies			
Student Signature: My sig policies in the Lessons of				tions and classroom	
Student Signature				Date	
Parent or Guardian Signa	ture: My signature i	ndicates that I have	e read and understand	the expectations and	
classroom policies for my Syllabus.	• •			-	
Student Signature		·		Date	