

Parent of:

FirstName

MiddleName

LastName

2022-2023

# Bellevue Community Schools Student Information Form

Dear Parent, This is our new student information form. Please review all of the information below and change any information that is incorrect. Also, we are using the parent access module as well this year. Please review the password at the bottom of this page under your contact information. Go to our home page, [www.bellevue.k12.ia.us](http://www.bellevue.k12.ia.us), click on the "Parent" box and enter your last name as the user name and the password listed below. Thank you.

## Your Student's Advisor:

### Primary Contact

### Secondary Contact

Type \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone1 \_\_\_\_\_

Work Phone2 \_\_\_\_\_

Cell Phone1 \_\_\_\_\_

Cell Phone2 \_\_\_\_\_

Email \_\_\_\_\_

Password \_\_\_\_\_

Type \_\_\_\_\_ Relation \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone1 \_\_\_\_\_

Work Phone2 \_\_\_\_\_

Cell Phone1 \_\_\_\_\_

Cell Phone2 \_\_\_\_\_

Email \_\_\_\_\_

Password \_\_\_\_\_

### Student Information

Birthdate \_\_\_\_\_

What is the primary Language spoken at home? \_\_\_\_\_

Grade \_\_\_\_\_

Gender \_\_\_\_\_

Student Cell Phone Number \_\_\_\_\_

I give my 11th/12th grade student permission to leave the school premises during lunch. By signing, I am giving my 12th grade student permission to leave the school premises during their free block(s) \_\_\_\_\_

Is this student Hispanic/Latino? \_\_\_\_\_ What is the student's race: (Please circle) American Indian/Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White \_\_\_\_\_

Home Language Survey Date \_\_\_\_\_

Person authorized to pick your child (ren) up: (Other than those listed above)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Insurance Information: (Circle One) Private - Medicaid - Hawk-I or None

I give my student permission to take: Tylenol - Ibuprofen - None (Circle) for mild pain and/or discomfort at school Parent Initial \_\_\_\_\_  
Benadryl pill - Hydrocortisone cream - Antibiotic ointment - Tums

I give permission to my student to use the internet for educational purposes Parent Initial \_\_\_\_\_

Photo/Video Release: I give permission for Bellevue Schools to photograph/video my child in the promotion of the school. Example: Newspaper, website, bulletin board Parent Initial \_\_\_\_\_

I give my permission for my student to walk with a supervisor on field trips when necessary \_\_\_\_\_

Il agree to the Terms and Conditions of the 1:1 computer Handbook \_\_\_\_\_

Parents have a right to school records (newsletters, report cards, parent teacher conferences, etc. In cases of divorce, both parents will have access to such records unless otherwise decreed by a Court Order, a copy of which the school must have on file.

The Bellevue School District provides equal opportunity in programs provided to all students regardless of race, age, color, national origin, gender (sex), sexual orientation, gender identity, marital status, socioeconomic status, disability, religion, or creed. If you have questions or a grievance related to this policy please contact the district's Equity coordinator, Tom Meyer, Superintendent. 1601 State St. Bellevue, IA 52031 563-872-4913