

The CamdenForward School

PARENT INQUIRY FORM 2006-20007

ATTENTION: Please make sure that ALL lines are filled in when taking information from prospective parents/guardians.

Date: _____, _____, _____
Month Day Year

Parent/Guardian's Name _____

Relationship to Child _____

Address _____

City, State, Zip _____

Hm Phone# (____) _____ Wk# (____) _____ Cell# (____) _____

Child's Name _____

Age: _____ Birth date _____ Grade Requested _____ Mo. & Yr. of Interest _____

Last School Attended _____

2nd Child to be enrolled:

Name	Age	Birth date	Grade Requested
_____	_____	_____	_____
Last School Attended _____			

3rd Child to be enrolled:

Name	Age	Birth date	Grade Requested
_____	_____	_____	_____
Last School Attended _____			

Name (s) and grade (s) of siblings currently attending the CFS:

HOW DID YOU HEAR ABOUT THE CFS?

INFORMATION TAKEN BY STAFF PERSON: _____

DATE: _____



(OVER)

