Student Information Sheet 2026-2027

Wilton Public School

Student's Full Name:	**Date of Birth:**
Ethnicity (select all that apply)**:** Native American Caucasian Hispanic African American Asia Pacific Islander	**Gender:** Male Female
Home Phone:	**Grade:** PK K 1 2 3 4 5 6 7 8 9 10 11 12
Parent of Guardian Email(s): _____ _____	**Mailing and Street Address:** _____ _____
Mother's Name: **Mother's Employer:**	**Mother's Address** (if different from above): _____ _____
Mother's Work Phone:	**Mother's Cell Phone:**
Father's Name: **Father's Employer:**	**Father's Address** (if different from above): _____ _____
Father's Work Phone:	**Father's Cell Phone:**
In case of emergency which medical facility is your preference:	**Language(s) spoken at home other than English:**

Name and phone number of individual(s) allowed to pick up your student(s). We will contact these individuals in case of an emergency when parents are not available. List in preference order and provide at least one local contact person.

1)	
2)	
3)	
4)	

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Does your child have any health problems we should know about?

YES NO

If yes, explain:

Permission for the school office staff to give non-aspirin/pain reliever when needed, at the dosage recommended by the manufacturer.

YES NO

Permission for your child to participate in the health screenings conducted by the county public health nurse. The screening procedures may include scoliosis, vision, hearing, weight, blood pressure, and speech.

YES NO

Do you give permission for your child to attend school field trips?

YES NO

Does your child ride a bus?

YES NO

All rural bus patrons need to list a storm home family (in town) along with the storm family's home phone number.

_____

_____

_____

Where is the student currently living?

- **In a shelter**
- **With another family or other person because of loss of housing or as a result of economic hardship (sometimes referred to as "doubled-up")**
- **In a hotel/motel**
- **In a car, park, bus, train, or a campsite**
- **Other temporary living situation (Please describe: _____)**
- **In permanent housing**

Parent or Guardian name (print): _____

Parent or Guardian signature: _____

Date: _____

The Wilton School District does not discriminate on the basis of race, color, religion, national origin, sex, disability, or age in its programs or activities and provides equal access to the Boy Scouts and other designated youth groups. Any proof of identification collected will not be used as a condition of enrollment. The following persons have been designated to handle inquiries regarding the nondiscrimination policies: Title IX Coordinator: Andrew Jordan, Superintendent, 504 Dakota Ave, Wilton, ND 58579, 701-734-6331, andrew.jordan@k12.nd.us. Section 504 Coordinator: Cori Hilzendeger, Secondary Principal, 504 Dakota Ave, Wilton, ND 58579, 701-734-6331, cori.hilzendeger@k12.nd.us