

Demographic Survey

Last Name: _____ First Name: _____ Middle: _____

DOB: _____ Grade: _____ Gender: _____ Home Phone: _____

Cell Phones: _____ / _____

Ethnicity: () Caucasian () Black or African-American () American Indian () Hispanic
() Asian () Pacific Islander () Other: _____

Academic History:

Previous School: _____ () IEP () 504

Address: _____ County: _____

Phone: _____ Fax: _____

Home Address / Mailing Address:

Street: _____ PO Box: _____

City: _____ State: _____ Zip: _____

County: () Stark () Billings

Guardianship:

Last Name: _____ First Name: _____ Middle: _____

Address: _____

Employer: _____ Telephone: _____

Additional Information: _____

Last Name: _____ First Name: _____ Middle: _____

Address: _____

Employer: _____ Telephone: _____

Additional Information: _____