

PEE DEE ACADEMY

PERSONAL DATA INFORMATION

STUDENT

(LAST) _____ (FIRST) _____ (MIDDLE) _____ (CALLED) _____

RACE _____ SEX _____ SOCIAL SECURITY No. _____ - _____ - _____

DATE OF BIRTH _____

PLACE OF BIRTH _____
(CITY) _____ (COUNTY) _____ (STATE) _____

ADDRESS OF LAST SCHOOL ATTENDED:

NAME OF SCHOOL _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____

LAST DAY ENROLLED AT ABOVE SCHOOL _____
MONTH _____ DAY _____ YEAR _____

GRADE ENTERING P PDA _____ DATE TO ENTER PDA _____
MONTH/YEAR _____

FATHER, STEPFATHER, GUARDIAN (CIRCLE) _____ (NAME) _____

PLACE OF BIRTH _____ EDUCATION STATUS _____
RELIGION _____ OCCUPATION _____
MARITAL STATUS _____ CELL NUMBER _____
LIVING OR DEAD _____ DATE OF DEATH _____

MOTHER, STEPMOTHER, GUARDIAN (CIRCLE) _____ (NAME) _____

PLACE OF BIRTH _____ EDUCATION STATUS _____
RELIGION _____ OCCUPATION _____
MARITAL STATUS _____ CELL NUMBER _____
LIVING OR DEAD _____ DATE OF DEATH _____

IN CASE OF AN EMERGENCY PLEASE LIST:

ANOTHER PERSON TO CONTACT _____ PHONE # _____

FAMILY DOCTOR _____ PHONE # _____

NUMBER OF BROTHERS AND SISTERS _____
LIST NAMES AND AGES _____

HOME ADDRESS _____
PHONE # () _____
() _____