



FAMILY PROFILE FORM

This form will be retained in your child's file for the duration of their attendance at HPS PLEASE PRINT

____/____/____ Date 20____ - 20____ School Year _____ Grade Entering

Full Name of Student: _____ Student SS# ____ - ____ - ____

____/____/____ Birth Date Gender: Male / Female City School District: _____

Ethnicity: African-American / Asian/Pacific / Caucasian-American / Hispanic

Other: _____ Current School: _____ Previous School: _____

Student's Permanent Address: _____
(street, city, state, zip)

Church Affiliation: _____ Name of Pastor: _____

*If applicable, Court Custody Documentation must be attached

FATHER: Birth Legal Step Grand Guardian **Marital Status:** Married Single

Name: _____ SS# ____ - ____ - ____

Home Address: _____
(street, city, state, zip)

Email Address: _____

Home Phone#: (____) ____ - ____ Cell Phone#: (____) ____ - ____

Work Phone#: (____) ____ - ____ Employer & Occupation: _____

MOTHER: Birth Legal Step Grand Guardian **Marital Status:** Married Single

Name: _____ SS# ____ - ____ - ____

Home Address: _____
(street, city, state, zip)

Email Address: _____

Home Phone#: (____) ____ - ____ Cell Phone#: (____) ____ - ____

Work Phone#: (____) ____ - ____ Employer & Occupation: _____

Referral Source: Family/Friend Church TV Radio Other _____

IMPORTANT

Has your child ever been referred for Special Education Evaluation? yes no

Does your child receive special education services: yes no

If yes, please specify*: _____

*Paperwork must be submitted at the time of application in order for the student to be accurately admitted.

*Failure to submit SPECIAL ED documents may result in student expulsion.

Has your child ever been suspended/expelled from school: yes no

If yes, please explain: _____

List the last 2 schools your student attended: _____

Why do you want your child to attend Harvest Preparatory School? _____