

MacArthur High School
CAMPUS STUDENT INFORMATION FORM

(Please Print)

Today's date:

STUDENT INFORMATION

Student's last name: First: Middle Name student prefers to be called:

Is this your legal name? If not, what is your legal name? (Former name): Birth date: Age: Sex: M F

Yes No

Street address: Social Security no.: Home phone no.:
()
Previous home address City: State: ZIP Code:

Have you attended a TX public school in 2006-07? TX School Name Phone no:
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Have you ever attended a NEISD school? Yes No Name of NEISD School Approximate date of last attendance?

SCHOOLS ATTENDED IN THE LAST 3 YEARS

(Please give your insurance card to the receptionist.)

School Name	School Address	City, State	Year(s) Attended
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Were Special Education Services ever provided? Yes No If so, please provide dates?

Parent/Guardian Signature

Date