

FAMILY PARTICULARS

This form is to be completed and mailed to the Micha-el School Office with the completed Registration Form: 12160 Mt. Scott Blvd., Portland, OR, 97086.

Parents / Legal Guardians:

1) Name: _____	2) Name: _____
Relationship to Student: _____	Relationship to Student: _____
Home Address: _____	Home Address: _____
City, State, Zip: _____	City, State, Zip: _____
_____	_____
Work #: _____	Work #: _____
Occupation: _____	Occupation: _____
Employer: _____	Employer: _____
Industry (if Self-Employed): _____	Industry (if Self-Employed): _____
Home#: _____	Home#: _____
Cell #: _____	Cell #: _____
Email: _____	Email: _____

Please star (*) above which address to use for all correspondence about this application.

Name(s) and addresses of person(s) who should receive correspondence and notices (if different from above)

Name _____ Relationship to Student _____
Address _____ City, State, Zip _____ Home Telephone _____
phone _____

Name of person responsible for school expenses (this person must sign enrollment contract with other parent(s) or person(s) having custody) and give address, if not noted on this application.

Name _____ Relationship to Student _____
Address _____ City, State, Zip _____ Home Telephone _____

Are parents separated: Yes / No ?

Custody: Father / Mother ?

Other students' in student's family: (name, age, school/college/other)

School(s) student has attended

1) Name of School Address (City, State, Zip): _____

Attendance Dates: _____ Grade (s): _____

(continued on reverse)

2) Name of School Address (City, State, Zip) _____

Attendance Dates: _____ Grade (s): _____

3) Name of School Address (City, State, Zip) _____

Attendance Dates: _____ Grade (s): _____

Subjects enjoyed most _____

Subjects enjoyed least _____

School activities (clubs, teams, orchestra, etc.)

Activities outside school (hobbies, scouting, music, etc.)

What, if any, musical instruments are played?

What, if any, foreign languages are spoken?

What do you consider your student's strongest aptitudes and traits of character?

Micha-el School is a community school and parents are expected to join us in the adventure of education. If your child were to be admitted to the school, in what ways would you be interested in participating?

What role does media (tv, movies, mp3 players, video games, computers, etc) play in your family life?

Note below (or separately) any physical disabilities, academic and/or emotional challenges or conditions for which student has received treatment. Please list any medications your child takes to treat these conditions.

(Please attach any additional information to a separate piece of paper)