

OFFICE USE ONLY:

Student ID: \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Modified by: \_\_\_\_\_

FILE IN CUMULATIVE FOLDER

Rev. 10-28-19

# Student Information Update Form



## REQUIRED INFORMATION:

\_\_\_\_\_  
Student's Legal Name: Last, First

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Signature of  Parent or  Legal Guardian (check one)

\_\_\_\_\_  
Print Parent/Guardian Legal Name

\_\_\_\_\_  
Date signed

**Please fill out only the information that has changed. Information provided will be entered into the Hawaii Department of Education Student Information System. Address changes require two(2) current proof of residence such as utility bills, e.g. electricity, gas, cable, water . Other legal changes require official documentation.**

**!!! ENTER CHANGES ONLY !!!**

**HOUSEHOLD INFORMATION:** A household is the designation of a group of people in one nuclear family who live in the same home. All households must include at least one parent or legal guardian. Any school-aged siblings residing in the same house and attending a Hawaii DOE school should also be listed as household members. Changing demographic information for one sibling in a household will change the information for all siblings in the household.

Primary Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Primary Address: \_\_\_\_\_ City: \_\_\_\_\_ State: HI Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: HI Zip Code: \_\_\_\_\_

### Legal Parent/Guardian #1

Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_

Relationship to student (Circle One):      Father      Mother      Legal Guardian

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Military Status (check one):  Traditional Reservist / M-Day       Active Duty (Title 10)       Federal Technician (Title 32)

Branch of Service (check one):  Army       Marine       Air National Guard       Navy Reserves       Air Force

Coast Guard     Army Reserves       Marine Reserves       Navy       Army National Guard

Air Force Reserves     Coast Guard Reserves

Does this person work for the Federal Government or work on Federal Property?  Yes  No

**!!! ENTER CHANGES ONLY !!!**

**Legal Parent/Guardian #2**

Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_

Relationship to student (Circle One):            Father    Mother    Legal Guardian

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Address if different from student's:  
\_\_\_\_\_ City: \_\_\_\_\_ State: Zip Code: \_\_\_\_\_

Military Status (check one):  Traditional Reservist / M-Day     Active Duty (Title 10)     Federal Technician (Title 32)

Branch of Service (check one):  Army     Marine     Air National Guard     Navy Reserves     Air Force

Coast Guard     Army Reserves     Marine Reserves     Navy     Army National Guard

Air Force Reserves     Coast Guard Reserves

Does this person work for the Federal Government or work on Federal Property?  Yes  No

**School Aged Siblings (who attend Hawaii DOE Schools) in the Household:**

Sibling Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Current Hawaii DOE School: \_\_\_\_\_

Sibling Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Current Hawaii DOE School: \_\_\_\_\_

Sibling Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Current Hawaii DOE School: \_\_\_\_\_

Sibling Legal Last Name: \_\_\_\_\_ Legal First Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Current Hawaii DOE School: \_\_\_\_\_

**EMERGENCY CONTACTS (Other than Parent/Legal Guardian)**

1) Contact Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

2) Contact Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

3) Contact Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Other: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_