



Pembroke Central Schools
Student Information Changes



Student Name: _____ **Building:** _____

Phone changes:

Add: _____ Name: _____ Home/Cell/Work (Circle One)

Add: _____ Name: _____ Home/Cell/Work (Circle One)

Delete: _____ Delete: _____ Delete: _____

Add Pick Up People:

Name: _____ Address: _____

Phone: _____ Relationship to Student: _____

Name: _____ Address: _____

Phone: _____ Relationship to Student: _____

Name: _____ Address: _____

Phone: _____ Relationship to Student: _____

Delete Pick Up People:

Name : _____ Name: _____ Name: _____

(Please be advised we can not delete a custodial parent without court paperwork)

Email Address changes:

Add: _____

Delete: _____

I certify that all of the above information is true and I have legal authority to access the records of the student(s) listed above.

Parent Signature: _____ **Date:** _____

Please Print Name: _____

Staff Member Received by: _____ Date: _____