



Saint Francis of Assisi School

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www.sfab.org

Saint Francis of Assisi Mission Statement

We are a Catholic community of faith striving to follow Jesus, pledging each day to do our best by imitating St. Francis of Assisi as "instruments of peace." Our goal is to maintain a safe and healthy environment and to be academically prepared for this technological age.

Emergency Contact Information Form

Child Information

Name of child: _____

Date of birth: _____ Grade level: _____

Parents/Guardians' Information

Parent/Guardian #1

Name: _____ Relationship _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____

Parent/Guardian #2

Name: _____ Relationship _____

Address: _____

Home phone: _____ Work phone: _____

Cell phone: _____

Emergency Contacts:

	NAME	RELATIONSHIP	PHONE#
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1. _____

2. _____

3. _____

Physician: _____ Phone: _____

Dentist: _____ Phone: _____

MEDICAL AND BEHAVIOR FORM

Medical History: (optional)

Medications:

Allergies:

Please list any behaviors in which the staff should be aware of:

When your child is upset how does he/she react?

What is the best way to calm your child down when they are upset?

On the lines below please feel free to elaborate if there is anything else the staff should know in order to better meet your child's needs.
