

Truman Public School Emergency Information

Date: _____

Grade: _____

Student: _____
(Last) (First) (Middle)

Parent/Guardian:

(Father) (Mother)

Address: _____

(City) (State) (Zip Code)

Telephone number/s: _____

E-Mail address: _____

Family Dr. and Telephone number: _____

Where parents may be reached in case of an emergency: (place and telephone number)

(Father) (Mother)

Telephone number: _____

Person other than father or mother: _____

Relationship to the student: _____

Telephone number: _____

Snow emergency for bus students:

My child will stay with:(in town in Truman) _____

Relationship to the student: _____

Telephone number: _____