

**OFFICE USE ONLY:**

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

FILE IN CUMULATIVE FOLDER

## Student Information Update Form

### REQUIRED INFORMATION

\_\_\_\_\_  
Student's Legal Name (Last, First, MI)\_\_\_\_\_  
Grade\_\_\_\_\_  
Date of Birth\_\_\_\_\_  
Parent/Legal Guardian Signature\_\_\_\_\_  
Date

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 proof of residence. Other legal changes require official documentation.**

### **\*ONLY COMPLETE THE SECTIONS THAT REQUIRE AN UPDATE**

**Address changes:** Attach three (3) proof of residence (go to Kalani HS website for required documents)

**Legal changes:** Attach a clean copy of court document(s)

### 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: \_\_\_\_\_

#### 1) Legal Parent/Guardian

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

Relationship to student:      Father      Mother      Legal Guardian

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ email: \_\_\_\_\_

Address if different from student's:

\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing contact:    yes    no

Indicate if applicable: Military/Branch of Service: \_\_\_\_\_ or Works on Federal Gov't property?

2) **Legal Parent/Guardian**

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

Relationship to student:      Father      Mother      Legal Guardian

Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ email: \_\_\_\_\_

Address if different from student's:

\_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing contact:    yes    no

Indicate if applicable: Military/Branch of Service: \_\_\_\_\_ or Works on Federal Gov't property?

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

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

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

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

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

Sibling Last Name: \_\_\_\_\_ 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: \_\_\_\_\_

Other Changes (please specify): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_