

Period:

Student Emergency Card

Your Name:	Parent/Guardian Names: _____ _____ _____
Birthday:	
Home Language:	
Address: _____ _____	Phone Numbers: (home) _____ (work) _____ (pager/cell) _____

What is your favorite color? _____

What is your favorite animal? _____

What do you want to be doing in ten years? _____

What do you usually do after school? _____

What are your interests? What do you do for fun? _____

Check any of the items below that you are good at doing: Drawing/Art
 Reading Computers Sports Music or Rap Talking Acting

Do you like science? Why or why not? _____

How do you feel about working in groups? _____

What do you want to learn about this year? _____

What can I do to help you learn better? _____

Is there anything else you would like to tell me? _____