

St. Lucie County School District
SCHOOL FAMILY ACCESS FORM

| | |
|---------------|-------------------|
| Home Address: | City and Zip Code |
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| PARENT/GUARDIAN NAME: <i>Last</i> _____ <i>Appendage</i> <u> </u> <i>Jr</i> <u> </u> <i>II</i> <u> </u> <i>III</i> <i>First</i> _____ <i>Middle</i> _____ | | |
| Residential Guardian: Y / N | Email Address: | Primary Phone Number |

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| Current Grade: | Birth Date: <i>month/day/year</i> / / | Current School Placement: |

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