

# Kittson Central School District Number 2171

Box 670

Hallock, Minnesota 56728-0670

**Bob Jaszczak, Superintendent**

**K-12 Principal**

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**Jillayne Kraska**  
Elementary Lead Teacher

**Jami Carr**  
H.S. Student Dean/A.D.

August, 2017

Dear Parent/Guardian:

You will find a **Parent/Child Information** form on the reverse side of this letter that we need you to fill out to have all the information we need on each of your children and phone numbers where you can be reached.

We want to be sure you receive all correspondence, concerning your student's education from teachers, staff and/or school and to be able to contact you in case of an emergency. Names, addresses or telephone numbers, change from time to time and we need to be updated. Sometimes, it is easier for staff to contact you through e-mail. We would appreciate you writing down your e-mail address for this has become our primary form of communication for study table and various other things, If you change any of the above items, please remember to notify the school right away,

Since we live in a "snow" season, storm days do happen. We will always do our best to get the routes out before bad weather hits, but if we should ever need to use storm homes, we need you to fill in that information so we know where your child should go. Everyone not living in the city of Hallock needs to have a storm home in Hallock.

Last but not least, with our "automated phone notification system" we need to know which numbers you want on the list of numbers to be called in case of any school notification – usually used to notify you when there is no school but will also be used to update you on any game changes, early outs, late starts or other "reminder" calls. Please put a \* by the numbers you want in this system. You may have as many as you like.

We hope this form will cover everything we need and will alleviate you filling out three or four forms with similar information.

Thank you for your time and we ask that you return this form to the school as soon as possible.

Sincerely,

Stephanie, Judy & Denise

Parent/Legal Guardian: \_\_\_\_\_

(Male)

\_\_\_\_\_  
(Female)

Mailing Address: \_\_\_\_\_

**Telephone Numbers:**

**(Remember to \* all the numbers you would like in our automated phone notification system.)**

Home: \_\_\_\_\_

Work: \_\_\_\_\_ (Name) \_\_\_\_\_

Work: \_\_\_\_\_ (Name) \_\_\_\_\_

Cell: \_\_\_\_\_ (Name) \_\_\_\_\_

Cell: \_\_\_\_\_ (Name) \_\_\_\_\_

E-mail \_\_\_\_\_ (Name) \_\_\_\_\_

E-mail \_\_\_\_\_ (Name) \_\_\_\_\_

**Children:**

**Name:** \_\_\_\_\_ Grade \_\_\_\_\_

(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_

Storm Home: \_\_\_\_\_ Phone: \_\_\_\_\_

**Name:** \_\_\_\_\_ Grade \_\_\_\_\_

(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_

Storm Home: \_\_\_\_\_ Phone: \_\_\_\_\_

**Name:** \_\_\_\_\_ Grade \_\_\_\_\_

(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_

Storm Home: \_\_\_\_\_ Phone: \_\_\_\_\_

**Name:** \_\_\_\_\_ Grade \_\_\_\_\_

(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Social Security: \_\_\_\_\_

Storm Home: \_\_\_\_\_ Phone: \_\_\_\_\_

**For census purposes: Please add the names and birthdates of younger children.**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

**Please return this form as soon as possible. Thank you!**