

Crisp Academy Student Information
2024-2025

Date _____

Student _____ Grade for 2024-2025 _____
First Middle Last

Date of Birth _____ M ____ F ____ SSN _____

Previous School Attended _____

Home Mailing
Address _____

Physical Address _____
(If mailing is P.O. Box)

Sibling Attending CA _____ Grade _____

Sibling Attending CA _____ Grade _____

Father _____ Cell# _____

Mailing Address _____

Physical Address _____
(If mailing is P.O. Box)

Email Address _____

Place of Employment _____ Work Phone _____

Mother _____ Cell# _____

Mailing Address _____

Physical Address _____
(If mailing is P.O. Box)

Email Address _____

Place of Employment _____ Work Phone _____

Financially Responsible Parent: _____

Registration/Academic Parent (If different): _____

Emergency Contact

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____