



Quality Education Institute of Durham  
800 Elmira Avenue, Durham, NC 27707  
Phone: (919) 680-6544  
www.qeidurham.org

## Student/Parent Information Sheet

Student's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Cell Phone(s): Mother's \_\_\_\_\_ Father's \_\_\_\_\_

Work Phone(s): Mother's \_\_\_\_\_ Father's \_\_\_\_\_

Both Parents E-mail: \_\_\_\_\_

What is the best way to contact you should the need arise (non-emergency)? \_\_\_\_\_

In case of an emergency please call: \_\_\_\_\_

Relationship to Child \_\_\_\_\_ Emergency Number \_\_\_\_\_

Please answer the following questions about your child.

Birthday: \_\_\_\_\_

Favorite Subject: \_\_\_\_\_

Least Favorite Subject: \_\_\_\_\_

Academic Strength: \_\_\_\_\_

Academic Weakness: \_\_\_\_\_

Please list your child's allergies:

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

*"Where Learning Is Primary"*