## **Denison Community Schools Foster Child Information Sheet**

Student Name		Grade Phone	
Foster Parents			
Address			
Street	City	Zip	
Social Worker's Name			
Agency			
Work Phone	Cell Phone_		
JCO's Name			
Phone Number			
Home School District (where the par	ent lives)		
Parent(s) Name			
Address			
Street	City	Zip	
Have parental rights been severed?			
If no, can the parent(s) contact the	child at school?		
Is the parent allowed to receive gra	des, progress reports and other scho	ool mailings?	
Does the student currently have an IEP?			
Is there any other information that you	ou feel the office should know o	concerning this	
**************	*************	*********	
Office use			
Entry #			
Student Entry Date	Student Exit Date		