

# Ursa Minor Contact Update Form

Student name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/guardian name: \_\_\_\_\_ Signature: \_\_\_\_\_

## 1. Do you want to ADD, DELETE, or UPDATE a contact? (Circle one)

Name of contact: \_\_\_\_\_

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

Home phone number: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

Work phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Check the boxes you want this contact to have access to:

- Emergency release contact       Behavior       Health  
 School communication       Web Access (ParentConnection)

### Relationship to Student

- Mother
- Father
- Stepmother
- Stepfather
- Foster mother
- Foster father
- Grandmother
- Grandfather
- Aunt
- Uncle
- Sibling
- Court appt. guardian
- Agency representative
- Caregiver
- Family friend
- Neighbor

## 2. Do you want to ADD, DELETE, or UPDATE a contact? (Circle one)

Name of contact: \_\_\_\_\_

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

Home phone number: \_\_\_\_\_

Cell phone number: \_\_\_\_\_

Work phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Check the boxes you want this contact to have access to:

- Emergency release contact       Behavior       Health  
 School communication       Web Access (ParentConnection)

Entered in Zangle

Date: \_\_\_\_\_

Initials: \_\_\_\_\_

Make one copy. File original in Enrollment Binder behind their Enrollment Form. File copy in Emergency Binder behind their Disaster Release Form.