



# CITRUS COUNTY SCHOOL DISTRICT SKYWARD FAMILY ACCESS VERIFICATION



|               |                    |
|---------------|--------------------|
| Home Address: | City and Zip Code: |
|---------------|--------------------|

Please fill in the appropriate information below for each parent and/or guardian that would like to have a login and password assigned to them. Parents and/or guardians of the same student(s) can share the same login and password if that would be easier for them.

**PARENT/GUARDIAN**

|   |                |  |        |                       |
|---|----------------|--|--------|-----------------------|
| Last Name<  |                | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First< | Middle<               |
| Residential Guardian:<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Email address: |  |        | Primary Phone Number: |

|   |                |  |        |                       |
|---|----------------|--|--------|-----------------------|
| Last Name<  |                | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First: | Middle:               |
| Residential Guardian:<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Email address: |  |        | Primary Phone Number: |

**CHILD INFORMATION**

|                |                                     |  |        |         |
|----------------|-------------------------------------|--|--------|---------|
| Last Name<     |                                     | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First: | Middle: |
| Current Grade: | Birthdate: (Month/Date/Year)<br>/ / | Current School:  |        |         |

|                |                                     |  |        |         |
|----------------|-------------------------------------|--|--------|---------|
| Last Name<     |                                     | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First: | Middle: |
| Current Grade: | Birthdate: (Month/Date/Year)<br>/ / | Current School:  |        |         |

|                |                                     |  |        |         |
|----------------|-------------------------------------|--|--------|---------|
| Last Name<     |                                     | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First: | Middle: |
| Current Grade: | Birthdate: (Month/Date/Year)<br>/ / | Current School:  |        |         |

|                |                                     |  |        |         |
|----------------|-------------------------------------|--|--------|---------|
| Last Name<     |                                     | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First: | Middle: |
| Current Grade: | Birthdate: (Month/Date/Year)<br>/ / | Current School:  |        |         |

|                |                                     |  |        |         |
|----------------|-------------------------------------|--|--------|---------|
| Last Name<     |                                     | Suffix:<br><input type="checkbox"/> Jr. <input type="checkbox"/> I <input type="checkbox"/> II | First: | Middle: |
| Current Grade: | Birthdate: (Month/Date/Year)<br>/ / | Current School:  |        |         |

By signing below, you are stating that you are the parent / guardian of the children listed above and have the right to access their private student information.

Print name: \_\_\_\_\_

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