



KAMEHAMEHA SCHOOLS MAUI

SY 2016 - 2017 Student Directory Information

STUDENT INFORMATION

Student ID		GRADE Entering (<i>circle</i>)	9	10	11	12
Name (Last, First, Middle)						
Mailing Address						
Residence Address (if different from mailing)						
Student's Cell Phone						
Student Lives With	<input type="checkbox"/> Both Parents/Guardians <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other:					

PARENT/LEGAL GUARDIAN INFORMATION

Primary Contact						
Name (Last, First)						
Relationship to Student	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian					
Mailing Address						
Home Phone				Cell Phone		
Employer				Work Phone		
Email Address						
Highest Level of Education Please check one	<input type="checkbox"/> High school diploma/GED <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's degree or higher <input type="checkbox"/> I wish not to disclose					
Secondary Contact						
Name (Last, First)						
Relationship to Student	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian					
Mailing Address						
Home Phone						
Employer						
Email Address						
Highest Level of Education Please check one	<input type="checkbox"/> High school diploma/GED <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's degree or higher <input type="checkbox"/> I wish not to disclose					

BIOLOGICAL PARENTS DEMOGRAPHICS

Biological Parents are: ☐ Married ☐ Never Married ☐ Widower/Widow ☐ Legally Separated* ☐ Divorced*

☐ Custody Belongs to: _____

* **Must provide legal documentation if Legally Separated/Divorced. Also must provide legal custodial documents.**

ADDITIONAL CONTACT INFORMATION

Provide two responsible adults living on Maui, other than parents/legal guardians who can act as an additional contact and are authorized to pick up your student in the event that you cannot be reached (list different households with different phone numbers)

CONTACT 1— Name		Relationship to Student	
Home Phone		Cell Phone	
CONTACT 2— Name		Relationship to Student	
Home Phone		Cell Phone	

SIBLINGS attending KAMEHAMEHA SCHOOLS MAUI

Name (Last, First)		Grade Entering	
Name (Last, First)		Grade Entering	
Name (Last, First)		Grade Entering	
Name (Last, First)		Grade Entering	
Name (Last, First)		Grade Entering	

STATEMENT OF PERMISSION

I/We consent to the making of visual and/or sound recordings (Materials) of my child by Kamehameha Schools (KS); I/We consent to KS's use of the Materials in any manner and purpose deemed appropriate by KS; I/We waive any right to approve the Materials; and I/We understand that KS is not obligated to use any of the Materials.

I/We also give permission for my child to take part in all field trips, excursions and organized activities that may be scheduled by KS. This includes, but is not limited to, school-sponsored activities for classes, academic programs, athletics teams, boarding programs, etc.

I/We understand that, while KS will take reasonable precautions for the safety and welfare of my child while participating in KS activities, KS does not assume responsibility for accidents or injury to my child. I/We agree to assume any and all risks of such injury, loss or damage that may arise out of my child's participation in any activity conducted by KS. I/We further agree to indemnify and hold KS forever harmless from and against any and all claims which may be asserted by any person, including but not limited to those claiming by or through me, arising out of my child's participation in any program or activity conducted by KS.

I understand that from time to time KS may transport my/our child(ren) in a vehicle other than a Type I or II school bus to and from a school function or school-related activity, and I agree to waive, release and hold harmless the State of Hawai'i, the Hawai'i Association of Independent Schools (HAIS), and Kamehameha Schools, its trustees, directors/officers, employees, and agents from any responsibility for injuries, liabilities, losses or damages connected with or arising out of the transportation of my/our child in a vehicle other than a Type I or II school bus.

I/We understand that Kamehameha Schools (KS) is making available information contained in my child's student records, including but not limited to, college and career planning information, planning activities, test scores, survey responses, test prep, e-transcripts, e-letters of recommendation, and National Student Clearinghouse data, to Naviance for the sole purpose of assisting my child with college and career planning, and that the information shared by KS with Naviance will not be distributed to third parties without first obtaining my consent. I/We further understand and agree that KS may use the data collected by Naviance for the purpose of internal reporting and statistical use.

Signatures of BOTH parents are required

If only one parent signs or adult other than parent signs, legal documentation must be submitted with this form.

Mother's Signature/Legal Guardian

Printed Name

Date

Father's Signature/Legal Guardian

Printed Name

Date