



DEMOCRACY PREP FREEDOM PREP

Work Hard. Go to College. Change the World!

Emergency Contact Form

Scholar Name _____ DOB _____ Grade _____

Home Address _____

Parent/Guardian Name _____

Home # _____ Cell # _____

Email Address _____

Siblings at Freedom Prep:

Name _____ Grade _____

Name _____ Grade _____

Name _____ Grade _____

Do we have permission to text and email you with updates? Yes/ No

If yes, what is your cell phone carrier? _____

Preferred method of communication (Check one please) Text Call Email

If there are any custody issues we need to be aware of, please provide appropriate documentation.

Emergency Contact 1:

Name _____

Relationship to scholar _____

Phone # _____ Alternate # _____

Do they have permission to pick up your scholar? Yes/ No

Emergency Contact 2:

Name _____

Relationship to scholar _____

Phone # _____ Alternate # _____

Do they have permission to pick up your scholar? Yes/ No

Any additional information that may be helpful in the case of emergency (ie allergies, important medical or personal info)

The mission of Democracy Prep is to educate responsible citizen-scholars for success in the college of their choice and a life of active citizenship.

Health Insurance Status (Response Required)

Does the scholar have any health insurance including NJ FamilyCare/Medicaid, Medicare, private or other?

Yes ___ If Yes, name of insurance company_____

No ___ NJ FamilyCare provides free or low cost health insurance for uninsured children and certain low income parents. For more information, call 800-701-0710 or visit www.njfamilycare.org to apply online. You may release my name and address to the NJ FamilyCare Program to contact me about health insurance.

Signature: _____ **Printed Name:** _____ **Date:** _____

Written consent required pursuant to 20 U.S.C. § 1232g (b)(1) and 34 C.F.R. 99.30 (b).

Residency Status (Response Required)

Identify the scholar's current living arrangements.

_____ **Doubled-up;** sharing the housing of other persons due to economic hardship, loss of housing or other reasons (such as domestic violence)

_____ **Shelters;** emergency or transitional housing

_____ **Awaiting Foster Care Placement**

_____ **Hotel / Motel**

_____ **Other Temporary Living Situation;** includes cars, parks, campgrounds, temporary trailers including FEMA trailers, or abandoned buildings

_____ **Permanent Housing;** scholar is living in fixed and regular housing

Military Status (Response Required)

Identify the current military status of any of the scholar's parents/legal guardians.

_____ **Not Military Connected** – The parents/guardians of the scholar are not military-connected.

_____ **Active Duty** – Scholar is a dependent of a member of the ACTIVE Duty Forces (fulltime) Army, Navy, Air Force, Marine Corps or Coast Guard.

_____ **National Guard or Reserve** – Scholar is a dependent of a member of the National Guard or Reserve Forces (Army, Navy, Air Force, Marine Corps or National Guard).

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