

# Allatoona High School NJROTC

## Cadet Personal Data Information Form

*(Please print legibly in blue or black ink)*

### Student Information

\_\_\_\_\_ Date

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Student ID: \_\_\_\_\_ Gender: Male / Female U.S. Citizen: Y / N

Race: African Amer / Alaska Native / Asian Amer / Caucasian / Hispanic / Native Amer / Other / Pacific Isl.

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (Month / Day / Year)

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Street: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Grade: 9 / 10 / 11 / 12 Expected Graduation Date (Month and Year): \_\_\_\_\_

Cadet E-mail address: \_\_\_\_\_

### Parent/Guardian Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Street: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent E-mail address: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Street: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent E-mail address: \_\_\_\_\_

**The above information is for the use of the Allatoona NJROTC Unit only. No information will be shared or provided to the United States military or any other government or non-government agency.**