



### Parent(s) Accumulative Record Report

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

Student's Legal Name \_\_\_\_\_

Address \_\_\_\_\_ *Last* \_\_\_\_\_ *First* \_\_\_\_\_ *Middle* \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Last School Attended \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

First or Native Language: English \_\_\_\_\_ Other \_\_\_\_\_

**Please provide a copy of student's Birth Certificate the first year at GEMS**

=====  
Mother's Name \_\_\_\_\_

Address (if different from student) \_\_\_\_\_

Home Phone (if different from student) \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Occupation \_\_\_\_\_

Company \_\_\_\_\_ Work Phone \_\_\_\_\_  
=====

Father's Name \_\_\_\_\_

Address (if different from student) \_\_\_\_\_

Home Phone (if different from student) \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Occupation \_\_\_\_\_

Company \_\_\_\_\_ Work Phone \_\_\_\_\_  
=====

Parents: Married \_\_\_ Divorced \_\_\_, parent with legal custody \_\_\_\_\_ (please provide proof of custody)  
Separated \_\_\_ Mother Deceased \_\_\_ Father Deceased \_\_\_  
=====

Legal Guardian's Name \_\_\_\_\_

Address (if different from student) \_\_\_\_\_

Home Phone (if different from student) \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Occupation \_\_\_\_\_

Company \_\_\_\_\_ Work Phone \_\_\_\_\_  
=====

**If parents are separated, both parents and/or guardians will be sent a copy of their student's grades unless we receive documentation requesting that this information should be withheld.**

**It is the responsibility of the parent(s) and/or guardians to notify the school if an address or phone number changes.**



Proud Member of  
The Graham Family of Schools  
In Partnership with  
EL Education

*\*This institution is an equal opportunity provider*

140 E. 16<sup>th</sup> Ave. Columbus, OH 43201  
614-253-4000 (p) 614-253-4001 (p)  
614-643-5146 (f)  
gemsschool.org