

# INFORMATION FORM

**THIS INFORMATION IS NEEDED FOR THE BASEHOR-LINWOOD  
DIRECTORY, PAYROLL AND OTHER MAILING MATERIAL.  
PLEASE FILL OUT COMPLETELY AND RETURN.  
IF THIS INFORMATION SHOULD CHANGE DURING THE SCHOOL YEAR,  
PLEASE NOTIFY THE DISTRICT OFFICE.**

NAME \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ P.O. BOX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ TELEPHONE NUMBER (\_\_\_\_) \_\_\_\_\_

CELL NUMBER (\_\_\_\_) \_\_\_\_\_ E-MAIL \_\_\_\_\_

ASSIGNMENT \_\_\_\_\_

**(Be specific i.e. bldg. location, grade level if applicable, etc.)**

EXTRA DUTIES \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_

**(For auto insurance purposes)**

STEP AND COLUMN PLACEMENT \_\_\_\_\_

**(New Teachers Only)**

**EMERGENCY CONTACT #1:**

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_) \_\_\_\_\_ CELL NUMBER (\_\_\_\_) \_\_\_\_\_

**EMERGENCY CONTACT #2:**

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_) \_\_\_\_\_ CELL NUMBER (\_\_\_\_) \_\_\_\_\_