Truancy Parent/Guardian

YOUTH DEMOGRAPHICS First Name: Middle Name: Last Name: Date of Birth: **PARENT/GUARDIAN** Relationship (pick one): Mother Stepfather Stepmother Father Legal Guardian Grandparent Other Relative Lives on Own First Name: Middle Name: Last Name: Address: City: State: Zip: Phone: Relationship (pick one): Father Mother Stepfather Stepmother Legal Guardian Grandparent Other Relative Lives on Own First Name: Middle Name: Last Name: Address: City: State: Zip:

Phone: