



# Chesterfield County School District

## PowerSchool Parent Portal Custody/Identification Form

### Student

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

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

SUNS Number: \_\_\_\_\_ *(completed by school personnel)*

\_\_\_\_\_ Parent          \_\_\_\_\_ Guardian

\_\_\_\_\_ No Identification

\_\_\_\_\_ Custody Restriction

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number

.....  
**For Office Use Only**

\_\_\_\_\_ Identification Verified

\_\_\_\_\_ Custody Restriction Approved

.....  
Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Parent/Guardian Login \_\_\_\_\_

Parent/Guardian Password \_\_\_\_\_