CHANGE OF STUDENT INFORMATION Use ONE form per family.

Please list ALL siblings affected at other school sites.

Student resides with: (Circ	cle One) Mother/Fa	ather Guardian	StpMother	/Father StpFather/Mother	
Student's name		Grade	_Site	ID#	
Student's name		Grade	_Site	ID#	
Student's name		Grade	_Site	ID#	
Student's name		Grade	_Site	ID#	
Address Change: (Musbill or lease agreement. OLD address:	•			_	
NEW address:					
Change of home phone:					
Change of Cell phone or pager: Mom/Guardian:					
Email: Mom		Dad:			
Change/Addition to em					
Person:					
Home Phone:	Cell Phone:		Work Ph	one:	
Person:	Gender:	Relationship:		Able to pick up child? Y N	
Home Phone:	Cell Phone:		Work Ph	one:	
Change of marital statu	16.				
New Name:					
New Ivanie.					
Change of custody: (cho	oose ONE) Must pr	ovide court doc	cumentation	<u>n.</u>	
Father to Mother M	Nother to Father	Guardian to Parent	Parent to	o Guardian	
Change of name for ST	<u>'UDENT</u> : <u>(Must p</u>	orovide birth ce	<u>rtificate or</u>	court documentation.)	
From (name):					
To (name):					
Parent/Guardian Signature:				Date:	

PLEASE RETURN THIS FORM TO THE CENTRAL ENROLLMENT REGISTRAR.