

ENGLEWOOD SCHOOL DISTRICT

Office Pupil Personnel Services
District Registration Office
Martin Luther King Building
274 Knickerbocker Rd, Englewood, NJ 07631
Phone (201) 862-6212 Fax (201) 862-6231

REQUEST FOR CHANGE OF ADDRESS

Date	
Name of Parent(s) Guardian(s):	
Name of child #1	
Name of child #2	
Name of child #3	
Your Former Address:	
Your Current Address:	
Email:	
Parent or Guardian must sign the form below and identification.	w and be prepared to show proof of guardianship
Parent/Guardian	
Signature	
Please Provide 3 Proof of Residency Plus Cu	urrent Photo Identification:
 □ Deed □ Mortgage statement □ Lease □ Most Recent Utility Bill 	☐ License with Current Address ☐ Notice from Government Agency ☐ Financial Statement Tax Bill Current Cable Bill