BRUNSWICK (BRITTONKILL) CENTRAL SCHOOLS CHANGE OF ADDRESS FORM

Please return this form with proofs of residency to: Registrar's Office, Brunswick Central Supervisory Union, 3992 NY 2, Troy, NY 12180

Children Residing in Household (Use an additional sheet of paper if necessary)	DATE OF MOVE	·/	
1) ,	Grade:	_ DOB:/	_
2)	Grade:	_ DOB://	_
3)	Grade:	_ DOB://	_
4)	Grade:	_ DOB:/	-
Old Address:		NY	
- Street City		State	Zip
New Address:		NY	
Street PARENT/GUARDIAN INFORMA	TION	State	Zip
Guardian #1:		*	
	Last		
Relationship to child: \square Mother \square Stepmother \square Father \square Stepfather \square Legal Gu	ıardian □Foster P	arent	
Adults and Languist 1997, and Consult and		811/	
Mailing address if different from above:Street	City	NY State	Zip
Home Phone :()	Cell #	: [
Guardian #2:			
First MI Relationship to child: □ Mother □ Stepmother □ Father □ Stepfather □ Legal Gu	Last Jardian □Foster P	arent	
*			
Mailing address if different from above: Street	City	NY State	Zip
Home Phone :() Work #:_()	Cell #	(
Proof of Address Change/Resid	lency		
Proof of Residency/Address Change Submitted (TWO REQUIRED)			
□ Current Lease/Rental Agreement			
□ Current Mortgage			
☐ Current Utility Bill (electric, gas, fuel, cable, etc.)			
🗅 Other:			
(These residency questions are intended to address the McKinney-Vento Act 42	U.S.C. 11435. Th	ne answers will help det	termine the
services the student may be eligible to receive)	_ N.		
Is your current address a temporary living arrangement? If you answered yes, is this temporary living arrangement due to loss of	□ No If housing or an e	conomic hardshin? V	as a No
If you answered YES to BOTH of the above questions, where is the stud			C3
□ In a hotel/motel □ In a shelter □ Moving from place to place □ Wi			artment
□ In a place not designed for ordinary sleeping accommodations such as a car, p			
□ Other (please explain):			

I affirm that the above information is true and correct. I understand that this false information may be unlawful.	form is an officia	al record and that the p	rovision of
Signature:	Date	i	