



Have you Moved? Changed Phone Numbers?

Please complete the section below and return to the Main Office.

CHANGE REQUEST

(Please Note: For address change, proof of residency must be provided – i.e. copy of lease or current utility bill)

_____ Address Change **If Address Change, the MOVE-IN DATE was/is _____

_____ Phone Number Change Home Cell Work Other _____

Scholars

Scholar Name: _____ Grade: _____

Scholar Name: _____ Grade: _____

Scholar Name: _____ Grade: _____

Scholar Name: _____ Grade: _____

Scholar Name: _____ Grade: _____

New Address

New Address: _____ Apt/ Unit: _____

City: _____ State: _____ Zip Code: _____

Phone Number: (____) _____

Email: _____

Parent Name (Please Print): _____ Relationship _____

Parent Signature: _____ Date: _____

OFFICE USE

Date Received: _____ Entered: Skyward _____ POR uploaded: _____

Previous Address: _____

Resident District: _____ Initials _____