

Use this form to report changes - address, phone, email,
students leaving the district, emergency contacts

School Tool
STUDENT CHANGE FORM

Student Name _____ Student # _____ Gr. _____ Bldg. _____

Student Name _____ Student # _____ Gr. _____ Bldg. _____

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For **change of address** please complete the following, attach 2 proof(s) of residency and return to the Registrar's Office/FEC.

Old Address _____ _____			
_____ New Address _____ _____		Effective Date _____	
_____ New Phone _____ (Home phone)	_____ / _____ (Father Cell Phone/Mother Cell Phone)	_____ / _____ (Father Work Phone/Mother Work Phone)	
_____ Parent/Guardian Name (please print)		_____ Parent/Guardian Signature	

For **email address change** please complete:

Old email address (if applicable) _____
New email address _____

For **students leaving** the district please complete:

_____ Student Left _____ (Name)	Last day of attendance _____
_____ Building _____ (Transferred to)	_____ (Reason for transfer)
_____ Device/Hotspot/charger Returned	Serial # _____

For adding an **emergency contact**:

_____ (Name)	_____ (Relationship)	_____ (phone number – optional)
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Other/Comments: _____

IMPORTANT: School Office Personnel

IMPORTANT: Central Office Personnel

Information taken by: _____ Date _____

Changed in ST by: _____ Date _____